109th Congress, 1st Session - - - - - - - - - - - - House Document 109–40

FINANCIAL DISCLOSURE
REPORTS
OF MEMBERS OF THE U.S. HOUSE OF REPRESENTATIVES

FOR THE PERIOD BETWEEN

January 1, 2004 and December 31, 2004

COMMUNICATION FROM THE CLERK OF THE HOUSE

TRANSMITTING

THE ANNUAL COMPILATION OF PERSONAL FINANCIAL DISCLOSURE STATEMENTS AND AMENDMENTS THERETO FILED WITH THE CLERK OF THE HOUSE OF REPRESENTATIVES, PURSUANT TO RULE XXVI, CLAUSE 1, OF THE HOUSE RULES

(Volume 4 of 4)

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JULY 11, 2005.—Referred to the Committee on Standards of Official Conduct and ordered to be printed

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Financial Disclosure Reports of

109th Congress, 1st Session– – – – – – – – – – – – House Document 109–40

FINANCIAL DISCLOSURE
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OF MEMBERS OF THE U.S. HOUSE OF REPRESENTATIVES

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JULY 11, 2005.—Referred to the Committee on Standards of Official Conduct and ordered to be printed

U.S. GOVERNMENT PRINTING OFFICE

22–370 WASHINGTON : 2005

LETTER OF SUBMITTAL

OFFICE OF THE CLERK,
U.S. HOUSE OF REPRESENTATIVES,
Washington, DC, July 7, 2005.

Hon. J. DENNIS HASTERT,
The Speaker, The Capitol,
U.S. House of Representatives, Washington, DC.

DEAR MR. SPEAKER: I hereby submit the annual compilation of personal financial disclosure statements filed with the Clerk of the House of Representatives pursuant to the Ethics in Government Act of 1978, as amended, 5 U.S.C. app. § 101–111 (1994), and the House Rule XXVI.

This compilation contains the personal financial disclosure statements and amendments thereto required to be filed by Members of the House pursuant to the Act and House Rule XXVI by May 16, 2005. The compilation includes reported financial transactions which occurred between January 1, 2004 and December 31, 2004.

House Rule XXVI provides that the annual compilation of reports filed with the Clerk be printed as a House document by August 1 and contain all such reports filed by Members within the period beginning January 1 and ending June 15 of each year. This compilation is submitted accordingly.

With best wishes, I am

Sincerely,

JEFF TRANDAHL,
Clerk, House of Representatives.

Enclosures.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A

For use by Members, officers, and employees

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U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED
(Office Use Only)

Martin Olav Sabo
(Full Name)

2336 Rayburn House Office Building Washington, DC 20515
(Mailing Address)

202-225-4755
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representative — State: MN, District: 5th	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐	No ☑
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☑
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑	No ☐
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☑
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☑
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☑
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑	No ☐
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☑
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☑

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Martin Olav Sabo	5-12-05

4375

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Martin Olav Sabo

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
State of MN Retirement Plan	None	Annuity	$5,001 - $15,000	NA
Lutheran Brotherhood IRA (LB Growth Fund)	$1,001 - $15,000	DIVIDENDS	NONE	NA
Farm Land - North Dakota	$50,001 - $100,000	Rent & Crops	$5,001 - $15,000	NA
Congressional Federal Credit Union	$100,001 - $250,000	INTEREST	$1,001 - $2,500	NA
A&P Mutual Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	NA
MOSAIC Money Fund	$1,001 - $15,000	INTEREST	$1 - $200	NA

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Martin Olav Sabo

SP	Northern States Power (XCEL STOCK)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	NA
SP	Mass Mutual	$1,001 - $15,000	INTEREST	$201 - $1,000	NA
SP	INTEL	$1,001 - $15,000	DIVIDENDS	$1 - $200	NA
SP	CISCO	$1,001 - $15,000	None	NONE	NA
SP	General Electric	$1,001 - $15,000	DIVIDENDS	$1 - $200	NA
SP	Pfizer	$1,001 - $15,000	DIVIDENDS	$1 - $200	NA
SP	Congressional Federal Credit Union Certificate	$15,001 - $50,000	INTEREST	$1,001 - $2,500	NA
SP	Congressional Federal Credit Union Certificate	$15,001 - $50,000	INTEREST	$1,001 - $2,500	NA
SP	Statoil Stock	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	NA
SP	UBS Pace Large Cap Growth Fund IRA	$15,001 - $50,000	INTEREST	NONE	NA
SP	UBS Large Cap Value Fund IRA	$15,001 - $50,000	INTEREST	NONE	NA
SP	UBS Pace International Equity Fund IRA	$1,001 - $15,000	INTEREST	NONE	NA
SP	UBS Small Medium Growth Fund IRA	$1,001 - $15,000	INTEREST	NONE	NA
SP	UBS Small Medium Value Fund IRA	$1,001 - $15,000	INTEREST	NONE	NA

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Martin Olav Sabo

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Radiology Mammography International (RMI) SPOUSE	Aug. 23 to Sept. 3, 2004	Minneapolis, MN to Beijing, China to Minneapolis MN	Y	N	N	None

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED
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2005 MAY 16 AM 11:12
MC
(Office Use Only)

John Tony Salazar
(Full Name)

P.O. Box 510 Manassa, Co. 81141 719-588-2451
(Mailing Address) Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives — State: Co District: 03	☐ Officer or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☑
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☑	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐	No ☑
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☑
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑	No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	John T Salazar	5-12-05

SCHEDULE I - EARNED INCOME

Name John Tony Salazar

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Colorado State Legislature	Legislative Salary	$30,000

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name John Tony Salazar

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	1187 acres of farmland in Conejos & Costilla Counties, Co.	$1,000,001 - $5,000,000	Farm Income	$1,000,001 - $5,000,000	P
JT	1st Community Bank, La Jara, CO.	$1,001 - $15,000	INTEREST	$201 - $1,000	
JT	Home Depot Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	HP-Compac Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	Spudseed.com stock	$1,001 - $15,000	DIVIDENDS	NONE	

SCHEDULE IV - TRANSACTIONS

Name John Tony Salazar

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
JT	40 Acres of Land	P	8-10-04	$50,001 - $100,000

SCHEDULE V - LIABILITIES

Name John Tony Salazar

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
JT	1st SW Bank of Alamosa, Co.	Revolving Operating Land Loan	$1,000,001 - $5,000,000
JT	Farm Credit Service of So. Colorado	Land Loans	$100,001 - $250,000
JT	Farm Service Agency FMHA	Land Loans	$50,001 - $100,000
JT	Farm Service Agency - Wheat CCC Loan	CCC Loan	$50,001 - $100,000
JT	Farm Credit Leasing	Equipment Lease	$100,001 - $250,000
JT	John Deere Credit	Equipment	$50,001 - $100,000
JT	Wells Fargo Leasing	Building Lease	$100,001 - $250,000

SCHEDULE VIII - POSITIONS

Name John Tony Salazar

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Director	Spudseed.com

JOHN T. SALAZAR
3RD DISTRICT OF COLORADO

1531 LONGWORTH HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
202-225-4761
202-226-9669 (FAX)

HAND DELIVERED

Congress of the United States
House of Representatives
Washington, DC 20515

COMMITTEE ON TRANSPORTATION AND INFRASTRUCTURE
SUBCOMMITTEE ON WATER RESOURCES AND THE ENVIRONMENT
SUBCOMMITTEE ON AVIATION

COMMITTEE ON AGRICULTURE
SUBCOMMITTEE ON LIVESTOCK AND HORTICULTURE
SUBCOMMITTEE ON GENERAL FARM COMMODITIES AND RISK MANAGEMENT

June 15, 2005

2005 JUN 15 AM 11:34
U.S. HOUSE OF REPRESENTATIVES
LEGISLATIVE RESOURCE CENTER

MC

The Hon. Jeff Trandahl
Clerk of the House
H154 Capitol
Washington, D.C. 20515

Dear Clerk Trandahl:

Upon further review of my financial disclosure report for 2004, I have discovered an error that requires correction. My income from the 1187 acres of farmland in Conejos and Costilla Counties in Colorado was incorrectly reported. The amount of income should have been reported in the column marked "$100,001-$1,000,000."

Please consider this letter as an amendment to my 2004 financial disclosure report. Thanks for your assistance in this matter.

Sincerely,

John T. Salazar
Member of Congress

134 WEST B STREET
PUEBLO, CO 81003
719-543-8200
719-543-8204 (FAX)

225 NORTH 5TH STREET, STE 702
GRAND JUNCTION, CO 81501
970-245-7107
970-245-2194 (FAX)

609 MAIN STREET, #6
ALAMOSA, CO 81101
719-587-5105
719-587-5137 (FAX)

700 MAIN AVENUE, STE F
DURANGO, CO 81301
970-375-3264
970-375-3265 (FAX)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2005 MAY 17 AM 11:32 9
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
MC

LINDA T. SANCHEZ
(Full Name)

20619 WARDHAM AVE (562) 429-8499
(Mailing Address) Daytime Telephone

LAKEWOOD, CA 90715

Filer Status	[X] Member of the U.S. House of Representatives — State: CALIFORNIA District: 39	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [ ]	No [X]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Linda T. Sánchez	5-16-05

Name LINDA T. SANCHEZ | Page 1 of 8

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
N/A			

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2004	$2,000
XYZ Magazine	Article	Aug. 13, 2004	$500
N/A			

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Mega Corp. Stock					X								X										X								P
DC	Simon & Schuster		Indefinite																	Royalties									X			
JT	1st Bank of Paducah, KY accounts						X									X										X						
	N/A																															

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name LINDA T. SANCHEZ

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	N/A																														

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4390

SCHEDULE IV — TRANSACTIONS

Name LINDA T. SANCHEZ

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-04		X								
	N/A														

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4391

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude**: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	NELNET, COLORADO	STUDENT LOAN		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
N/A		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	~~PLANNED PARENTHOOD HISPANIC WOMEN'S NETWORK OF TEXAS~~	~~3-28-03~~ ~~7-13 to 7-14-03~~	~~Wash, D.C. – Portland – LOS ANGELES~~			~~N~~ ~~N~~	~~N~~ ~~N~~
	Confederation of Indian Industry	Jan 8-11 2004	Los Angeles, CA – Delhi, Agra, Hyderbad, mumbai (India) – Los Angeles, CA	Y	Y	Y	N
	William Velazquez Institute	April 9-16 2004	Los Angeles, CA – Havana, Cuba – Los Angeles, CA	Y	Y	Y	N
	National Council of La Raza	June 26-07, 2004	Houston, Tx – Phoenix, AZ – Los Angeles, CA	Y	Y	N	N
	The International Brotherhood of Teamsters	Nov. 29-Dec. 1, 2004	Los Angeles, CA – Atlanta, GA – San Salvador, El Salvador – Los Angeles, CA	Y	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
N/A	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	IBEW Pension	VESTED PENSION TO BE PAID UPON RETIREMENT

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

7

LEGISLATIVE RESOURCE CENTER
2005 MAY 12 PM 2:40
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED MC
(Office Use Only)

LORETTA L SANCHEZ
(Full Name)

1230 LONGWORTH WASHINGTON DC 20515 202 225-2965
(Mailing Address) Daytime Telephone

Filer Status	☒ Member of the U.S. House of Representatives — State: CA District: 47	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐	No ☒	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☒	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Loretta Sanchez	05-10-05

4395

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Mega Corp. Stock					X								X									X								P
DC	Simon & Schuster		Indefinite																	Royalties								X			
JT	1st Bank of Paducah, KY accounts						X									X									X						
	OC TEACHERS FED CREDIT			X												X						X									
	- SAVINGS & CHECKING			X												X						X									
	CROWELL, WEEDAN - SAVINGS					X										X							X								
	CROWELL, WEEDAN (IRA)				X											X							X								
	- COMCAST CORP CLASS A			X													X				X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name LORETTA SANCHEZ

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	CROWELL, WEEDON																														
	- INTEL CORP			X										X			X				X										
	- SIGNAL HILL BOND				X											X							X								S
	- CISCO SYSTEMS, INC.			X										X			X				X										
	- CITIGROUP INC.			X										X			X				X										
	CROWELL, WEEDON SAVINGS				X											X							X								
	PACIFIC AMERICAN SECURITIES																														
	- LACTFS BOND			X												X							X								
	- CORNING INC.																														S
	- WORLD SALES & MERCH	X														X					X										
	- CERADYNE INC.																														S
	- MICROSOFT CORP COM																														S
	- SAVINGS																														
	CONG. CREDIT UNION		X													X						X									
	TRISTAR CAPITAL COMM.			X													X				X										
	LEASING CORP.																														
	SANTA ANA, CA																														

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SCHEDULE IV — TRANSACTIONS

Name LORETTA SANCHEZ

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–04		X								
	SIGNAL HILL BOND - CALLED		X		10-01-04		X								
	CORNING INC		X		02-20-04	X									
	CERADYNE INC.		X		01-07-04		X								
	MICROSOFT CORP COM		X		02-20-04	X									

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Pfizer	Feb. 8-10	Los Angeles - Miami - Wash., D.C.	Y	Y	N	N
	William C. Velasquez Institute	April 9-16	Los Angeles - Cuba - Los Angeles	Y	Y	N	N
	Nat'l Council of La Raza	June 27	Dallas - Phoenix - Santa Ana	N	Y	N	N
	Nat'l Public Lands Grazing Campaign	Aug. 31-Sept. 3	Santa Ana - Bozeman - Los Angeles	Y	Y	N	N
	Hispanic Women's Corp.	Oct. 14-15	Santa Ana - Phoenix	Y	N	N	N
	SUPPORT Foundation	Nov. 29-Dec. 6	Los Angeles - Tokyo/Bangkok - Washington, D.C.	Y	N	N	N
	Lynch, Jones & Ryan Inc.	Jan. 29-30	Los Angeles - San Francisco - Orange County, Santa Ana	Y	N	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
TRUSTEE	CHAPMAN UNIVERSITY

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2005 98-729 (mac)

Use additional sheets if more space is required.

LORETTA SANCHEZ
47TH DISTRICT, CALIFORNIA

WASHINGTON OFFICE
1230 LONGWORTH BUILDING
WASHINGTON, DC 20515-0548
(202) 225-2965
(202) 225-5859 FAX

DISTRICT OFFICE
12397 LEWIS STREET, SUITE 101
GARDEN GROVE, CA 92840-4895
(714) 621-0102
(714) 621-0401 FAX

E-mail
Loretta@mail.house.gov

Website
www.house.gov/sanchez

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COMMITTEE ON ARMED SERVICES
SUBCOMMITTEES:
STRATEGIC FORCES
TOTAL FORCE

SELECT COMMITTEE ON HOMELAND SECURITY
SUBCOMMITTEES
INFRASTRUCTURE AND BORDER SECURITY
CYBERSECURITY, SCIENCE, AND RESEARCH & DEVELOPMENT
RULES

Congress of the United States
House of Representatives
Washington, DC 20515

May 10, 2005

LEGISLATIVE RESOURCE CENTER
2005 MAY 12 PM 2:40
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

Clerk, U.S. House of Representatives
Legislative Resource Center
B106 Cannon House Office Building
Washington, DC 20515-6612

To Whom It May Concern:

On October 1, 2003, I legally separated from my husband Stephen Brixey, which culminated in an October 18, 2004 divorce decree issued by the State of California. I have, therefore, not included his disclosure information in my 2004 financial disclosure filing.

Enclosed please find my financial disclosure filing with a full accounting of required information for my position as a Member of the House of Representatives.

If you have any questions regarding my filing, please feel free to contact me in my office at x52965.

Sincerely,

Loretta Sanchez
Member of Congress

PRINTED ON RECYCLED PAPER

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER

2005 MAY 16 PM 4:52

(Office Use Only)

MC

Bernard Sanders
(Full Name)

2233 Rayburn H.O.B.
Washington, D.C. 20515
(Mailing Address)

(202) 225-4115
Daytime Telephone

Filer Status	☒ Member of the U.S. House of Representatives — State: Vermont District: 00	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☒	No ☐
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☒	No ☐	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☒	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒	No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	[signature]	5-16-05

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Sanders & Driscoll, LLC	Spouse	N/A
	Burlington College	Spouse	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2004	$2,000
XYZ Magazine	Article	Aug. 13, 2004	$500
California Institute of Technology, Pasadena, CA 91125	Speech	April 15, 2004	$ 2,000.00

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source		Block B: Value of Asset (A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000)	Block C: Type of Income (DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income))	Block D: Amount of Income (I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000)	Block E: Transaction (P, S, E)
SP, DC, JT	*Examples:* SP Mega Corp. Stock		E	DIVIDENDS	IV	P
	Simon & Schuster		B–D Indefinite	Other Type of Income: Royalties	IX	
	1st Bank of Paducah, KY accounts		F	INTEREST	VI	
SP	North Country Federal Credit Union, Burlington, VT 05401		D	DIVIDENDS	II	
SP	TIAA – CREF Retirement Account		D			
SP	North Country Federal – IRA Credit Union, Burlington, VT		C			
JT	Condominium – 131 Main St. Burlington, VT 05401		F	RENT	VI (Gross rent)	

For additional assets and unearned income, use next page.

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Name Bernard Sanders | Page 5 of 6

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
JT	Wright patman CFCU, Washington, D.C.	Line of credit	X									
JT	Wright patman CFCU, Washington, D.C.	Mortgage on - 131 main St. Burlington, VT 05401			X							
JT	Wright patman CFCU, Washington, D.C.	credit card		X								
JT	MBNA	credit card	X									

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
Mr. Ross Perot, Texas	Commemorative plague with Sword w/ Engraving. re: Gulf War Illness	$450.00.

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C —Los Angeles—Cleveland	Y	Y	Y	2 Days
	Smith College, Amherst, MA (Keynote Speaker)	March 26, 2004	Washington, D.C. – to Hartford, CT	N	N	N	N
	NASDAQ Stock market – Leadership Summit/Meeting Miami, Florida	April 3-8, 2004	Burlington, VT – Miami, FL Burlington, VT	Y	Y	Y	Y (3 days)
	California Institute of Technology, Pasadena, CA –(Speaker)	April 14-17, 2004	San Francisco, CA to Los Angeles, CA	N	N	Y (Not at sponsor's expense)	Y (3 days)

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7 FAX

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UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A For use by Members, officers, and employees

H. James Saxton
(Full Name)

207 High Street Mount Holly, NJ 08060
(Mailing Address)

(609) 261-5800
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives — State: NJ District: 03	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐ No ☑	VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐ No ☑
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐		**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts--	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	J. Saxton	5/10/05

4408

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name H. James Saxton

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Wachovia Corp/First Union	$15,001 - $50,000	Dividends	$201 - $1,000	
	Eaton Vance CLASSIO SR FLTG	$15,001 - $50,000	Dividends	$1,001 - $2,500	
	Fidelity Advisor SRII	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	Fidelity Advisor SRIII	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	
	Seligman New Tech Fund	$1,001 - $15,000			
	2nd Mortgage Loan, John Winzinger & Donna Reichert	None	Interest	$201 - $1,000	Debt Satisfied

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name H. James Saxton

	207 High Street, Mt. Holly	$100,001 - $250,000	Rent	$5,001 - $15,000	
	Federal Credit Union	$1 - $1,000	Dividends	$1 - $200	
	Bank of America (formerly Fleet/Summit)	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Dell	$15,001 - $50,000			
	Sun Micro Systems	$1,001 - $15,000			
	Putnum Voyager	$1,001 - $15,000			
	Kulicke & Soffa Ind	$1,001 - $15,000			
	Vishay International Tech	$1,001 - $15,000			
	Texas Instruments(IRA)	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Alliance Bernstein Capital Reserves (IRA)	$1 - $1,000	DIVIDENDS	$1 - $200	
	Alliance Bernstein Capital Reserves MM	$1,001 - $15,000	Dividends	$1 - $200	
	Avaya Inc	$1 - $1,000			
	Corning	$1,001 - $15,000			
	Alliance Select Investor Series Tech (Allied Bernstein)	None			S

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name H. James Saxton

	Commerce Bank Checking	$1,001 - $15,000	Interest	$1 - $200	
	Sun America Style Select-Large Cap	$15,001 - $50,000			
	Hartford Mutual Midcap Fund	$15,001 - $50,000			
	Wachovia(IRA)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Sun America Style Focus multi	$15,001 - $50,000			P
	Corautus Genetics (IRA)	$1 - $1,000			
	North Jersey Dist WTR Suppy Commn NJ	$1,001 - $15,000	INTEREST	$201 - $1,000	
	Emc Corp Mass	$1,001 - $15,000			
	Oppenheimer Rochester Nat Muni	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P
	Cisco	$1,001 - $15,000			
	MEDCO Health Solutions	$1 - $1,000			
	First USA Bank(IRA)	$1,001 - $15,000	INTEREST	$201 - $1,000	
	Verizon Communications	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Merck & Co	None	DIVIDENDS	$201 - $1,000	S

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name H. James Saxton

	JP Morgan Chase	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	General Electric Co	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Exxon Mobile Corp	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Bristol Meyer Squib	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Honeywell Intl	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Oppenheimer MULTST NJ Muni	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P
	Franklin Small Midcap Growth	$1,001 - $15,000			P
	East Orange NJ0.0 020119	$1,001 - $15,000	INTEREST	$1 - $200	P
	NJ ST RFDG 4.125 040123	$1,001 - $15,000	INTEREST	$201 - $1,000	P
	Fidelity Advisor SR11 (IRA)	$1,001 - $15,000			P

SCHEDULE IV - TRANSACTIONS

Name H. James Saxton

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	East Orange NJ0.0 020119	P	12/13/04	$1,001 - $15,000
	Franklin Sm Md Cp GRW	P	04/14/04	$1,001 - $15,000
	NJ ST RFDG	P	9/27/04	$1,001 - $15,000
	Oppenheimer Rchstr NTL Muni FD	P	9/27/04	$1,001 - $15,000
	Oppenheimer NJ MUN FD	P	9/27/04	$1,001 - $15,000
	SunAmerica FC MLT GRTH	P	1/12/04	$1,001 - $15,000
	SunAmerica FC MLT Grth	P	3/12/04	$1,001 - $15,000
	MERCK	S	11/10/2004	$1,001 - $15,000
	Alliance Select Investor Series Tech	S	11/10/2004	$1,001 - $15,000
	Fidelity Advisor SR11 (IRA)	P	11/10/04	$1,001 - $15,000

SCHEDULE V - LIABILITIES

Name H. James Saxton

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Aurora Mortgage	Mortgage, 207 High St, Mt Holly, NJ	$50,001 - $100,000

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

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U.S. HOUSE OF REPRESENTATIVES

H. James Saxton
(Full Name)

207 High Street Mount Holly, NJ 08060
(Mailing Address)

(609) 261-5800
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives — State: NJ District: 03	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

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II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐ No ☑	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

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Trusts–	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions–	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	J. Saxton	5/10/05

4415

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name H. James Saxton

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
Wachovia Corp/First Union	$15,001 - $50,000	Dividends	$201 - $1,000	
Eaton Vance CLASSIO SR FLTG	$15,001 - $50,000	Dividends	$1,001 - $2,500	
Fidelity Advisor SRII	$15,001 - $50,000	DIVIDENDS	$1 - $200	
Fidelity Advisor SRIII	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	
Seligman New Tech Fund	$1,001 - $15,000			
2nd Mortgage Loan, John Winzinger & Donna Reichert	None	Interest	$201 - $1,000	Debt Satisfied

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name H. James Saxton

	207 High Street, Mt. Holly	$100,001 - $250,000	Rent	$5,001 - $15,000	
	Federal Credit Union	$1 - $1,000	Dividends	$1 - $200	
	Bank of America (formerly Fleet/Summit)	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Dell	$15,001 - $50,000			
	Sun Micro Systems	$1,001 - $15,000			
	Putnum Voyager	$1,001 - $15,000			
	Kulicke & Soffa Ind	$1,001 - $15,000			
	Vishay International Tech	$1,001 - $15,000			
	Texas Instruments(IRA)	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Alliance Bernstein Capital Reserves (IRA)	$1 - $1,000	DIVIDENDS	$1 - $200	
	Alliance Bernstein Capital Reserves MM	$1,001 - $15,000	Dividends	$1 - $200	
	Avaya Inc	$1 - $1,000			
	Corning	$1,001 - $15,000			
	Alliance Select Investor Series Tech (Allied Bernstein)	None			S

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name H. James Saxton

	Commerce Bank Checking	$1,001 - $15,000	Interest	$1 - $200	
	Sun America Style Select-Large Cap	$15,001 - $50,000			
	Hartford Mutual Midcap Fund	$15,001 - $50,000			
	Wachovia(IRA)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Sun America Style Focus multi	$15,001 - $50,000			P
	Corautus Genetics (IRA)	$1 - $1,000			
	North Jersey Dist WTR Suppy Commn NJ	$1,001 - $15,000	INTEREST	$201 - $1,000	
	Emc Corp Mass	$1,001 - $15,000			
	Oppenheimer Rochester Nat Muni	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P
	Cisco	$1,001 - $15,000			
	MEDCO Health Solutions	$1 - $1,000			
	First USA Bank(IRA)	$1,001 - $15,000	INTEREST	$201 - $1,000	
	Verizon Communications	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Merck & Co	None	DIVIDENDS	$201 - $1,000	S

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name H. James Saxton

	JP Morgan Chase	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	General Electric Co	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Exxon Mobile Corp	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Bristol Meyer Squib	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Honeywell Intl	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Oppenheimer MULTST NJ Muni	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P
	Franklin Small Midcap Growth	$1,001 - $15,000			P
	East Orange NJ0.0 020119	$1,001 - $15,000	INTEREST	$1 - $200	P
	NJ ST RFDG 4.125 040123	$1,001 - $15,000	INTEREST	$201 - $1,000	P
	Fidelity Advisor SR11 (IRA)	$1,001 - $15,000			P

SCHEDULE IV - TRANSACTIONS

Name H. James Saxton

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	East Orange NJ0.0 020119	P	12/13/04	$1,001 - $15,000
	Franklin Sm Md Cp GRW	P	04/14/04	$1,001 - $15,000
	NJ ST RFDG	P	9/27/04	$1,001 - $15,000
	Oppenheimer Rchstr NTL Muni FD	P	9/27/04	$1,001 - $15,000
	Oppenheimer NJ MUN FD	P	9/27/04	$1,001 - $15,000
	SunAmerica FC MLT GRTH	P	1/12/04	$1,001 - $15,000
	SunAmerica FC MLT Grth	P	3/12/04	$1,001 - $15,000
	MERCK	S	11/10/2004	$1,001 - $15,000
	Alliance Select Investor Series Tech	S	11/10/2004	$1,001 - $15,000
	Fidelity Advisor SR11 (IRA)	P	11/10/04	$1,001 - $15,000

SCHEDULE V - LIABILITIES

Name H. James Saxton

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Aurora Mortgage	Mortgage, 207 High St, Mt Holly, NJ	$50,001 - $100,000

JIM SAXTON
THIRD DISTRICT, NEW JERSEY
WWW.HOUSE.GOV/SAXTON
JOINT ECONOMIC COMMITTEE
CHAIRMAN
RESOURCES COMMITTEE
SUBCOMMITTEES:
FISHERIES AND OCEANS
NATIONAL PARKS

ARMED SERVICES COMMITTEE
SUBCOMMITTEES:
TERRORISM, UNCONVENTIONAL THREATS AND CAPABILITIES
CHAIRMAN
PROJECTION FORCES
MILITARY PERSONNEL

U.S. House of Representatives
Washington, DC 20515

May 10, 2005

Mr. Jeff Trandahl
Clerk of the House
Legislative Resource Center
B 106 Cannon
Washington, DC 20515

Re: Amendment to 2003 Financial Disclosure

Dear Mr. Trandahl:

Regrettably, an item was inadvertently omitted from my 2003 Financial Disclosure.

Fleet Bank, formerly known as Summit Bank (currently known as Bank of America), should have been listed as an asset. Although the exact value as of 12/31/03 is not known, a good faith estimate based upon current value would be approximately $2,600. There were no dividends or earnings.

Thank you for your assistance in amending my 2003 Financial Disclosure.

Sincerely,

Jim Saxton
Member of Congress

JS/mac

VIA FAX: 202-226-4874, attention Janice Glosson

☐ 2217 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515-3003
(202) 225-4765

☐ 100 HIGH STREET, SUITE 301
MOUNT HOLLY, NJ 08060-1658
(609) 261-5400

☐ 247 MAIN STREET
TOMS RIVER, NJ 08753-7459
(732) 914-2020

☐ 1 MARINE AVENUE
CHERRY HILL, NJ 08002-3051
(856) 428-0520

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

CLERK'S DESIGNEE DEPARTMENT 7

2005 MAY 16 P 1 5:47

(Office Use Only) MC

Janice D. Schakowsky
(Full Name)

1101 Ridge
(Mailing Address)

Evanston, IL 60202

Daytime Telephone (202) 225-2111

Filer Status	[X] Member of the U.S. House of Representatives	State: IL District: 9	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Janice D. Schakowsky	5/16/05

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Name: Janice D. Schakowsky

Page 2 of 7

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Strategic Consulting Group, NA Inc.	Spouse's Salary	NA
	State of Illinois	Legislative Pension	$18,439

For payments to charity in lieu of honoraria, use Schedule II.

Name Janice D. Schakowsky

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT). In the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E P, S, E
SP, DC, JT	Examples: SP Mega Corp. Stock					X								X										X								P
	Examples: Simon & Schuster			Indefinite																Royalties									X			
	Examples: 1st Bank of Paducah, KY accounts						X									X									X							
	Amcap Fund Inc Class A			X										X								X										
	Fundamental Investors Inc. Class A			X										X								X										
	Growth Fund American Inc. Class A			X										X								X										
	Washington Mutual Investors Fund Inc. Class A			X										X								X										
	Euro Pacific Growth Fund Class A			X										X								X										
	Small Cap World Fund Class A			X										X								X										

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Janice D. Schakowsky

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	American High Interest Trust Class A			X										X								X										
	Intermediate Bond Fund America Class A			X										X								X										
	Morgan Stanley Tax Exempt Securities Trust / Class D		X											X								X										
	Oppenheimer & Co. Primary Liquidity Fund (Cash Account)			X										X								X										
JT	Putnam College Advantage 1998			X										X							X											
JT	" " " 2000			X										X							X											
JT	" " " 2001			X										X							X											
JT	" " " 2001			X										X							X											
	La Salle Bank - checking			X												X						X										
	Northwestern Mutual Money Market (Deposit held at M&I Bank)			X										X								X										
SP	Private Bank			X												X						X										

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
SP	Citibank A Advantage	Credit Card		X								
	MBNA	Credit Card	X									
	MBNA	Credit Card	X									

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	The Congressional Program of the Aspen Institute	Jan 5-11	Chicago-Honolulu-Hawaii-Chicago	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Governing Council	American Jewish Congress - Midwest Region
Policy Council	Citizen Action of Illinois
Advisory Council of the Board of Directors	Palliative Care Center of the North Shore
Advisory Board	Friends of Tsad Kadima, 1745 Lake Eleanor Dr Deerfield, IL
Advisory Board	Interfaith Houses, Chicago

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

Use additional sheets if more space is required.

-UN ED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

ISI TIVE RESOURCE CENTER
2005 MAY 16 PM 2:57
OF
U.S.
(Office Use Only)

MC

Adam Bennett Schiff
(Full Name)
35 South Raymond Ave, Suite 205
Pasadena, CA 91105
(Mailing Address)
Daytime Telephone
626-304-2727

Filer Status	☒ Member of the U.S. House of Representatives State: CA District: 29	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐	No ☒	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒	No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5/12/05

4430

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT). In the optional column on the far left

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

		Block A	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E P, S, E
SP	SP	Mega Corp. Stock					X								X										X								P
DC, *Examples:*		Simon & Schuster		Indefinite																	Royalties									X			
JT		1st Bank of Paducah, KY accounts						X									X										X						
		Munihlds Cal. Ins. FD11			X										X									X									
		I Shares Trust S&P 500 Index				X									X									X									
		Diamonds Trust SI			X										X									X									
		Nasdaq - 100 Trust SI			X										X								X										
		Morgan Stanley Liquid Asset			X										X								X										S
		US Gov't Money Market	X																		NA	X											S

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Adam B. Schiff

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	B of A Janus Twenty IRA				X									X			X							X								S
	Fidelity Puritan IRA					X								X			X								X							
	Morgan Stanley - Wyeth Stock GRUT Trust			X																1/3 interest	X											
	Ishares Trust - Dow Jones US Financial Sector Index Fund			X																		X										
	Ishares Trust - Dow Jones Healthcare Sector Index Fund			X																		X										
	Ishares Trust - Dow Jones US Indl Sector Index Fund			X																		X										
	Mansfield Insnl Fd Inc			X																		X										
	Ciscosys Inc			X																	X											S
	Constellation Brands Inc Class A			X																	X											
	Cox Communication Class A			X																	X											S
	Dow Chemical Co			X																		X										
	Interactive Corp.			X																	X											S
	Ishares Trust Tech sector index Fund			X										X								X										
	Wyeth Stock								X					X													X					
	Fortune Brands			X										X								X										
	General Electric			X										X								X										
	Hewlett Packard			X										X								X										
	Pepsico			X										X								X										
	Wellpoint			X																	X											
	Ishares Trust Russell 2000 Index Fund				X									X									X									
	Ishares Trust, Dow Jones Select Dividend Index (Cash Rolled over from Nationwide Retirement Accounts and B of A Janus Twenty IRA)					X								X										X								P

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Adam B. Schiff

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	UBS Bank USA Dep Acct			X												X						X										P

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SCHEDULE IV — TRANSACTIONS

Name Adam B. Schiff

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–04		X								
	Cisco Sys Inc.		X		9-15-04	X									
	Cox Communications Class A		X		9-15-04	X									
	Interactive corp.		X		9-15-04	X									
	I Shares Trust DJ Select	X			9-15-04	X									
	I Shares Trust DJ Select	X			8-11-04		X								
	Janus Twenty Fund (Rollover)		X		8-11-04		X								

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Name	Page 6 of 8

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Morgan Stanley	Margin account				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Democratic Leadership Council	Mar 25-28	Wash, DC - Jacksonville FL - DC	Y	Y	Y	N
	Community Financial Services Association of America	Sep 4-5	Wash, DC — Jackson Hole, WY	Y	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Member, Board of Directors	Community Child Education Center
Member, Board of Directors	Big Brothers Big Sisters of America

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2005 96-729 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

9

FILING ADMINISTRATIVE SERVICES CENTER

2005 JUN -9 PM 4:44

HC U.S. HOUSE OF REPRESENTATIVES

(Office Use Only)

DEBBIE WASSERMAN SCHULTZ
(Full Name)

4479 FOXGLOVE LN WESTON FL 33331 (954) 384-2225
(Mailing Address) Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives	State: FLORIDA District: 20	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Debbie Wasserman Schultz	6/9/05

4438

Name: DEBBIE WASSERMAN SCHULTZ

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$8,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	STATE OF FLORIDA	LEGISLATIVE SALARY	25195
	NOVA SOUTHEASTERN UNIVERSITY	COMMUNITY AFFAIRS DIRECTOR SALARY	47340
	COMMUNITY BANK OF BROWARD	SPOUSE SALARY	N/A

For payments to charity in lieu of honoraria, use Schedule II.

Name Debbie Wasserman Schultz	Page 2 of 8

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2004	$2,000
XYZ Magazine	Article	Aug. 13, 2004	$500

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Name: DEBBIE WASSERMAN SCHULTZ

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	*Examples*	SP	Mega Corp. Stock					X							X										X								P
			Simon & Schuster		Indefinite																Royalties									X			
			1st Bank of Paducah, KY accounts						X								X										X						
SP	CHARLES SCHWAB IRA (SCHWAB MONEY MKT FUND)				X										X								X										
SP	401K RETIREMENT ACCOUNT					X																											
	MFC AMERICAN EUROPAC				X										X								X										
	MFC TEMPLETON FOREIGN				X																												
	MFC FIDELITY ADV. OVERSEAS				X																												
	~~MFC AMERICAN CENTURY SMALL CAP~~				X																												
	SMALL CAP INDEX FUND				X																												
	STATE OF FLORIDA PENSION		VALUE NOT READILY AVAILABLE																		X WILL RECEIVE 1999						AT LEAST $5						

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: REDDIE WASSERMAN SCHULTZ

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction P, S, E
SP	IRA 2054343 COMMUNITY BANK OF BRAWARD	D: X			
SP	1000 SHARES ~~COMMUNITY BANK OF BRAWARD~~	F: X			
DC	500 SHARES ~~COMMUNITY BANK OF BRAWARD~~	C: X			
SP	57 Shares Union Planters Corp		CAPITAL GAINS: X	IV: X	S
JT	3.15 Acre Lot, Newbury, NH	E: X			P

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Name DEBBIE WASSERMAN SCHULTZ

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-04		X								
JT	*268.83 SHS FIDELITY ADV. LARGE CAP FD.		X		4-20-04	X									
SP	57 SHS UNION PLANTERS CORP		X		5-27-04	X									
JT	3.15 ACRES LOT NEWBERRY N.H.	X			5-28-04			X							

* Inadvertently omitted from 2003 report.

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Name: DEBBIE WASSERMAN SCHULTZ

Page 6 of 8

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
JT	WACHOVIA BANK N.A.	REVOLVING CHARGE		X								
JT	INDEPENDENT BANKERS BANK	MORTGAGE ON 3 ACRE LOT NEWBERRY N.H.			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
DIRECTOR	NATIONAL SAFETY COUNCIL

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer

Date	Parties To	Terms of Agreement

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED
LEGISLATIVE RESOURCE CENTER
2005 MAY 12 PM 3:30
H.C. U.S. HOUSE OF REPRESENTATIVES
(Office Use Only)

ALLYSON Y. SCHWARTZ
(Full Name)

100 West Ave. South Bldg E30
(Mailing Address)

Jenkintown PA 19046
Daytime Telephone: 202-225-6111

Filer Status	[X] Member of the U.S. House of Representatives — State: PA District: 13	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Allyson Y. Schwartz	5-9-05

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Name ALLYSON Y. SCHWARTZ | Page 2 of 6

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Senate of Pa. Harrisburg PA.	Salary	$ 66,573.
	University of Pennsylvania	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name ALLYSON Y. SCHWARTZ | Page 3 of 6

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source		Block B: Value of Asset												Block C: Type of Income							Block D: Amount of Income											Block E: Transaction
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	Examples: SP Mega Corp. Stock						X								X										X									P
	Examples: DC Simon & Schuster			Indefinite																	Royalties									X				
	Examples: JT 1st Bank of Paducah, KY accounts							X									X										X							
JT	Fidelity Growth & Income Fund					X									X			X								X								
JT	Fidelity Equity II Fund				X										X			X					X											
JT	Fidelity Magellan Fund				X										X			X					X											
JT	Vanguard Windsor II Fund						X								X			X									X							
JT	Vanguard Health Care Fund				X										X			X						X										
JT	Franklin Templeton Mutual Beacon Fund				X										X			X						X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Allyson Y. Schwartz

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	Vanguard 500 Index Fund				X									X			X							X								
	Lincoln Financial Group						X													Retirement												
	T. Rowe Price / UBS					X														"												
	Commonwealth of PA - Deferred Compensation					X														"												
SP	Fidelity Fund						X													"												
SP	T. Rowe Price / UBS					X														"												
SP	Franklin Templeton - Mutual Beacon						X													"												
SP	Harbor International Fund				X															"												
SP	Schwab S&P 500 Fund				X															"												
SP	Wachovia Mutual Funds				X															"												
SP	PNC Bank / Fidelity Freedom Fd				X															"												
SP	Vanguard Health Care Fund					X														"												
SP	Vanguard 500 Index Fund					X														"												
SP	Vanguard US Growth Fund				X															"												
SP	Israeli Bonds			X																"												
SP	Merrill Lynch S&P 500					X														"												
SP	TIAA / CREF			X																"												
SP	Vanguard 500 Index Fund				X															"												
SP	Vanguard Morgan Growth Fund			X																"												
SP	Vanguard US Growth Fund		X																	"												
SP	TIAA / CREF			X																"												
SP	Vanguard Money Market Fund			X																"												

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name

Page 5 of 6

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	Williams Co. - 23rd St Properties, NY				X															Real Estate						X						
JT	House + Property Forest Rate, Truro, MA							X							X											X						
JT	PNC Bank Savings Acct							X								X																
JT	PNC Bank Checking Acct				X																	X										

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board of Trustees	Arcadia University (non-profit)
Board of Directors	Chestnut Hill HealthCare (non-profit)
Board of Directors	Philadelphia Health Management Corporation (non-profit)

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
2005 MAY 13 AM 10: 17
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED
(Office Use Only)

ALLYSON Y. SCHWARTZ
(Full Name)

100 West Ave. South Bldg E30
(Mailing Address)

Jenkintown PA 19046
Daytime Telephone: 202-225-6111

Filer Status	☒ Member of the U.S. House of Representatives — State: PA District: 13	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒ No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐ No ☒
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒ No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☒ No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐ No ☒	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☒	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Allyson Y. Schwartz	5-9-05

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Senate of Pa. Harrisburg PA.	Salary	$ 66,573.
	University of Pennsylvania	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset (A None; B $1,001 – $15,000; C $15,001 – $50,000; D $50,001 – $100,000; E $100,001 – $250,000; F $250,001 – $500,000; G $500,001 – $1,000,000; H $1,000,001 – $5,000,000; I $5,000,001 – $25,000,000; J $25,000,001 – $50,000,000; K $50,000,001 – $1,000,000,000; L Over $1,000,000,000)	Block C: Type of Income (DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify; For Example, Partnership Income or Farm Income))	Block D: Amount of Income (I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000)	Block E: Transaction (P, S, E)
SP	Mega Corp. Stock		X	IV	P
DC	Simon & Schuster	Indefinite	Royalties		X
JT	1st Bank of Paducah, KY accounts	X	X	V	
JT	Fidelity Growth + Income Fund		X	V	
JT	Fidelity Equity II Fund	X	X	II	
JT	Fidelity Magellan Fund	X	X	II	
JT	Vanguard Windsor II Fund	X	X	VI	
JT	Vanguard Health Care Fund	X	X	III	
JT	Franklin Templeton Mutual Beacon Fund	X	X	III	

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: Allyson Y. Schwartz

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	Vanguard 500 Index Fund				X									X			X							X								
	Lincoln Financial Group						X													Retirement												
	T. Rowe Price / UBS					X														"												
	Commonwealth of PA - Deferred Compensation					X														"												
SP	Fidelity Fund						X													"												
SP	T. Rowe Price / UBS					X														"												
SP	Franklin Templeton - Mutual Beacon						X													"												
SP	Harbor International Fund				X															"												
SP	Schwab S&P 500 Fund				X															"												
SP	Wachovia Mutual Funds				X															"												
SP	PNC Bank / Fidelity Freedom Fd				X															"												
SP	Vanguard Health Care Fund					X														"												
SP	Vanguard 500 Index Fund					X														"												
SP	Vanguard US Growth Fund				X															"												
SP	Israeli Bonds			X																"												
SP	Merrill Lynch S&P 500					X														"												
SP	TIAA / CREF			X																"												
SP	Vanguard 500 Index Fund				X															"												
SP	Vanguard Morgan Growth Fund			X																"												
SP	Vanguard US Growth Fund	X																		"												
SP	TIAA / CREF			X																"												
SP	Vanguard Money Market Fund			X																"												

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name

Page 5 of 6

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	Williams Co. - 23rd St. Properties, NY				X															Real Estate						X						
JT	House + Property, Central Park, Truro, MA							X							X											X						
JT	PNC Bank Savings Acct.							X								X																
JT	PNC Bank Checking Acct				X																	X										

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board of Trustees	Arcadia University (non-profit)
Board of Directors	Chestnut Hill HealthCare (non-profit)
Board of Directors	Philadelphia Health Management Corporation (non-profit)

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED 9

LEGISLATIVE RESOURCE CENTER
2005 MAY 16 PM 6:01
(Office Use Only) MC

JOHN JOSEPH HENRY SCHWARZ
(Full Name)

251 CENTRAL ST. BATTLE CREEK, MI 49017
(Mailing Address)

Daytime Telephone: 2022256276

Filer Status	[X] Member of the U.S. House of Representatives — State: ____ District: ____	[ ] Officer or Employee	Employing Office:
Report Type	[ ] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	[signature]	5/16/05

Name JOHN J.H. SCHWARZ | Page 1 of 1

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	MEDICAL PRACTICE	EARNED INCOME	$171,000

For payments to charity in lieu of honoraria, use Schedule II.

Name	Page ___ of ___

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2004	$2,000
XYZ Magazine	Article	Aug. 13, 2004	$500
NA			

This page may be copied if more space is required.

Name JOHN J. H. SCHWARZ | Page ___ of ___

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset	Block C: Type of Income	Block D: Amount of Income	Block E: Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
SP. Mega Corp. Stock		X	X	X	P
DC, *Examples:* Simon & Schuster		Indefinite	Royalties	X	
JT 1st Bank of Paducah, KY accounts		X	X	X	

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name | Page ___ of ___

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	KELLOGG CO.						X							X											X							
	IBM				X									X									X									
	ULTRA PETROLEUM						X														X											
	ANADARKO PETROLEUM				X									X									X									
	PFIZER			X																			X									
	PUBL CAREER TIAA				X									X										X								
	PROCTER & GAMBLE				X									X									X									
	STRYKER CORP				X									X								X										
	NEKEN				X									X									X									
	SOUTHERN MI BANK				X									X								X										
	HOME SW PROPERTY																															
	BATTLE CREEK, MI						X														X											
	FLATHEAD LAKE, MT									X											X											
	401 (K) ALL FIDELITY MAGELLAN							X													X											
	STANDARD/FEDERAL BANK REST				X											X							X									

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SCHEDULE IV — TRANSACTIONS

Name | Page of

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–04		X								
	PROCTOR & GAMBLE	X			6/12/04		X								

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Name JOHN J. H. SCHWARZ | Page 1 of 1

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	STANDARD-FEDERAL	LINE OF CREDIT				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
N/A		

Use additional sheets if more space is required.

Name	Page ___ of ___

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	NA						

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Name	Page ___ of ___

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
NA	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NA	

GPO: 2005 98-729 (mac)

Use additional sheets if more space is required.

JOE SCHWARZ, MD
7TH DISTRICT, MICHIGAN
COMMITTEES
ARMED SERVICES
READINESS
STRATEGIC FORCES
AGRICULTURE
SPECIALTY CROPS AND FOREIGN AGRICULTURE PROGRAMS
CONSERVATION, CREDIT, RURAL DEVELOPMENT AND RESEARCH
SCIENCE
ENVIRONMENT, TECHNOLOGY, AND STANDARDS
ENERGY

Congress of the United States
House of Representatives
Washington, DC 20515–2207

WASHINGTON OFFICE
128 CANNON HOUSE OFFICE BUILDING
(202) 225-6276

JACKSON OFFICE:
142 NORTH MECHANIC STREET
JACKSON, MI 49201
(517) 783-4486

DELTA TOWNSHIP OFFICE:
6604 WEST SAGINAW HIGHWAY
LANSING, MI 48917
(517) 323-6600

BATTLE CREEK OFFICE:
249 WEST MICHIGAN AVENUE
BATTLE CREEK, MICHIGAN 49017
(269) 965-9066

LEGISLATIVE RESOURCE CENTER
2005 JUN 14 PM 2:28
RECEIVED
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

June 14, 2005

The Honorable Jeff Trandahl
Clerk of the House
Room H-154, The Capitol
Washington, DC 20515

MC

Dear Mr. Trandahl,

This letter is to inform you that I accidentally omitted 300 shares of Glaxo Smith Kline stock, with a value of $13,269, from the 2004 Financial Disclosure Statement. The omission has just been brought to my attention, and I wanted to make you aware of this.

Very truly Yours,

Joe Schwarz, M.D.
Member of Congress

PRINTED ON RECYCLED PAPER

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER 7

2005 MAY 16 PM 4:45

(Office Use Only)

MC

U.S. Rep. David Scott
(Full Name)

417 Cannon House Office Building Washington, DC 20515
(Mailing Address)

(202) 225-2939
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives — State: GA District: 13	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐ No ☑	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	David Scott	5/16/2005

SCHEDULE I - EARNED INCOME

Name U.S. Rep. David Scott

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Dayn Mark Advertising	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name U.S. Rep. David Scott

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
Please see attached 2004 Year End Summary Financial Statements				

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SCHEDULE IV - TRANSACTIONS

Name U.S. Rep. David Scott

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Please see attached 2004 Year End Summary Financial Statements			

UBS Financial Services Inc.
3455 PEACHTREE RD, NE
SUITE 1700
ATLANTA, GA 30326

Your Financial Advisor
H TIMOTHY MCKANE
404-760-3000/800-234-9928

Resource Management Account®

PZAB069079-X8
9857580 - 000002

PZAB069079-X8 - 1204 - AX - 0

Account Number: AX 38555 77

2004 Year-End Summary
Important Tax-Planning Information

Please keep this statement for use with your tax-reporting documents, e.g., 1099, 5498, etc.

DAVID A SCOTT &
ALFREDIA A SCOTT JT TEN
162 BURT STREET NE
ATLANTA GA 30307-2538

Activity highlights

		Year-to-date
Deposits	$	48,140.15
Withdrawals		-22,000.00
Money fund checks paid		-28,721.86
Loan/Late payment interest charged		-760.00
Resource Management Account fee		-125.00
Miscellaneous charges and adjustments		-15.00
Net change from activity listed above	$	-2,481.71

Portfolio summary

		Year-to-date
Opening value	$	69,877.00
Net change from Activity Highlights		-2,481.71
Net security earnings		1,833.22
Change in value of investments		-3,985.06
Value on December 31	$	65,243.43

Earnings summary

		Paid in 2004
Taxable		
Dividends	$	1,833.10
Interest		12
Total taxable security earnings	$	1,833.22
Total current year security earnings	$	1,833.22
Net security earnings	$	1,833.22

Important message:
Clients with account balances or activity in December should refer to the monthly statement following the Year-End Summary.

4473

Account Number: AX 39555 77
Your Financial Advisor
H TIMOTHY MCKANE
404-768-3000/800-234-9928

Resource Management Account®

PZAB069080-XB
Statement Period: 2004 Year-End Summary
8657560 - 000003

2004 Realized gains and losses

Estimated 2004 gains and losses for transactions with trade dates through 12/31/04 have been incorporated into this statement. The oldest security lot is liquidated first to calculate gains/losses (first-in, first-out or FIFO accounting method) unless you specified which lot to close when you placed your order (a versus purchase or VSP order). An asterisk (*) indicates a UBS Financial Services adjustment to cost basis. The number "1" indicates cost basis information has been provided by a source other than UBS Financial Services. See the back of the first page for additional information. This information is provided for informational purposes only and should not be relied upon for tax-filing purposes. Rely only on year-end tax forms when preparing your tax return. Gains/losses may not be adjusted for all capital changes. Cost basis for tax-exempt and AMT eligible coupon municipal securities has been adjusted automatically for estimated amortization of bond premiums. Estimates in the "Unclassified" section can not be classified as short-term or long-term due to missing information or the product is one for which a gain/loss calculation is not provided.

Security description	Method	Quantity/ Face value	Purchase date	Sale date	Sale amount	Purchase amount	Loss	Gain	Net gain/loss
Short-term capital gains and losses:									
COCA COLA CO COM	FIFO	96.800	10/21/03	03/11/04	$ 4,612.65	$ 4,502.14		$ 110.51	
INTEL CORP	FIFO	145.600	09/21/03	03/11/04	3,879.08	3,893.02	-13.95		
	FIFO	39.800	01/02/04	03/11/04	1,043.33	1,301.55	-258.22		
Total					$ 9,535.04	$ 9,696.71	$ -272.18	$ 110.51	$ -161.67
Net capital gains/losses:									$ -161.67

2004 Realized capital gain/loss summary

Short-term gains/losses:	$ -161.67

Checking summary

Unpaid checks

Check number	Description	Date	Amount
00151	BANK AMERICA	10/07	5,721.88
00152	DAYN MARK ADVERTISING	10/15	10,000.00
00153	DAYN MARE ADVERTISING	10/28	12,000.00
00154	DAVID AND ALFREDIA SCOTT	12/14	1,000.00

UBS Financial Services Inc.
3455 PEACHTREE RD, NE
SUITE 1700
ATLANTA, GA 30326

IMPORTANT NOTICE:
This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
UBS Financial Services Inc., 1285 Ave of Americas, NY, NY 10019 (Federal ID 13-2638166)

UBS Financial Services Inc.

2004 Consolidated Form 1099

Account Number AX 39555 77 P08L136GB1-X1
Tax Identification Number 263-66-4820

Your Financial Advisor or Contact
H TIMOTHY MCKANE 404-761-3000/800-234-9928

DAVID A SCOTT &
ALFREDIA A SCOTT JT TEN
162 HURT STREET NE
ATLANTA GA 30307-2538

00041084

Only the forms applicable to your account are shown.
Forms which are not applicable and therefore not shown include: Form 1099-OID , Form 1099-INT , Form 1099-MISC .

Form 1099-DIV Dividends and Distributions *(OMB No. 1545-0110)*

Line#	Category		Amount
1a	Ordinary dividends	*(includes lines 1b and 5)*	$ 1,833.10
1b	Qualified dividends		1,833.10
2a	Total capital gain distributions	*(includes lines 2b, 2c, 2d)*	0.00
2b	Unrecaptured section 1250 gain		0.00
2c	Section 1202 gain		0.00
2d	28% rate gain (Collectibles)		0.00
3	Nontaxable distributions		0.00
4	Federal income tax withheld		0.00
5	Investment expenses		0.00
6	Foreign tax paid		0.00
7	Foreign country or U.S. possession		
8	Liquidation distributions - cash		0.00
9	Liquidation distributions - non-cash (fair market value)		0.00

Form 1099-B Proceeds From Broker & Barter Exchange Transactions *(OMB No. 1545-0715)*

Line#	Category		Amount
1a	Date of sale or exchange		Various
1b	CUSIP number		Various
2	Stocks, bonds, etc. reported to IRS	*(gross proceeds less commissions)* $	9,530.04
3	Bartering		0.00
4	Federal income tax withheld		0.00
5	Number of shares exchanged		0
6	Classes of stock exchanged		Various
7	Description		See details

Details for Items Reported on Forms 1099

Dividends and Distributions Details Reported on Form 1099-DIV

Description	Additional Information	Ex Date	Payment Date	Tax year	Subject to AMT	Amount
Qualified dividends						
AFLAC INC		02/11/04	03/01/04	2004		14.25
		05/12/04	06/01/04	2004		14.25
		08/11/04	09/01/04	2004		14.25
		11/03/04	12/01/04	2004		14.25
Sub Total: AFLAC INC						$ 57.00

Continued on page 2

Your Financial Advisor or Contact
H TIMOTHY MCKANE
404-760-3000/800-234-6928

UBS Financial Services Inc.

2004 Consolidated Form 1099

POFL136912-X1

Dividends and Distributions Details Reported on Form 1099-DIV - continued

Description	Additional Information	Ex Date	Payment Date	Tax year	Subject to AMT		Amount
COCA COLA CO COM		03/11/04	04/01/04	2004			62.50
		06/14/04	07/01/04	2004			38.50
		09/13/04	10/01/04	2004			38.50
		11/29/04	12/15/04	2004			38.50
Sub Total: COCA COLA CO COM						$	**178.00**
GENL ELECTRIC CO		12/29/03	01/26/04	2004			28.00
		02/26/04	04/26/04	2004			48.00
		06/24/04	07/26/04	2004			48.00
		09/23/04	10/25/04	2004			48.00
Sub Total: GENL ELECTRIC CO						$	**164.00**
HOME DEPOT INC		03/09/04	03/22/04	2004			16.40
		06/08/04	06/24/04	2004			18.70
		09/31/04	09/16/04	2004			18.70
		11/30/04	12/16/04	2004			18.70
Sub Total: HOME DEPOT INC						$	**71.50**
INTEL CORP		02/04/04	03/01/04	2004			13.80
		05/05/04	06/01/04	2004			6.44
		08/04/04	09/01/04	2004			6.44
		11/03/04	12/01/04	2004			6.44
Sub Total: INTEL CORP						$	**33.12**
JOHNSON & JOHNSON COM		02/12/04	03/09/04	2004			23.04
		05/14/04	06/08/04	2004			27.36
		08/13/04	09/07/04	2004			27.36
		11/12/04	12/07/04	2004			27.36
Sub Total: JOHNSON & JOHNSON COM						$	**105.12**
MEDTRONIC INC		12/30/03	01/23/04	2004			9.06
		03/31/04	04/30/04	2004			9.06
		06/30/04	07/30/04	2004			10.47
		09/29/04	10/28/04	2004			10.47
Sub Total: MEDTRONIC INC						$	**39.06**
MICROSOFT CORP		08/23/04	09/14/04	2004			22.40
		11/15/04	12/02/04	2004			862.40
Sub Total: MICROSOFT CORP						$	**884.80**

Continued on page 3

UBS Financial Services Inc.

2004 Consolidated Form 1099

P08L136993-X1

Dividends and Distributions Details Reported on Form 1099-DIV - continued

Description	Additional information	Ex Date	Payment Date	Tax year	Subject to AMT	Amount
PFIZER INC		02/11/04	03/05/04	2004		59.50
		06/12/04	06/04/04	2004		59.50
		09/11/04	09/03/04	2004		59.50
		11/09/04	12/03/04	2004		59.50
Sub Total: PFIZER INC						$ 238.00
PRUDENTIAL FINANCIAL INC		11/19/04	12/20/04	2004		$ 62.50
Total Line 1b Qualified dividends						$ 1,833.10

Proceeds from Broker Transactions Details Reported on Form 1099-B

"Net proceeds" is the amount reported to the IRS. Accrued interest is reported on Form 1099-INT and details are also included in that Form's detail section.

Date of sale or activity (Line #1a)	Activity	Quantity/ Face value/ Shares exchanged	Description (Line #7)	Class of stock exchanged (Line #6)	Cusip number (Line #1b)	Net proceeds (Line #2)	Accrued interest	Federal income tax withheld (Line #4)
03/11/04	Sell	96	COCA COLA CO COM		191216100	4,612.65	.00	.00
03/11/04	Sell	184	INTEL CORP		458140100	4,922.39	.00	.00
			Total			$ 9,535.04	$ 0.00	$ 0.00

DAVID SCOTT
13TH DISTRICT, GEORGIA

www.house.gov/davidscott
David.Scott@mail.house.gov

COMMITTEE ON AGRICULTURE

COMMITTEE ON FINANCIAL SERVICES

Congress of the United States
House of Representatives
Washington, DC 20515–1013

June 15, 2005

Mr. Jeff Trandahl
Clerk
U.S. House of Representatives
Legislative Resource Center
B106 Cannon House Office Building
Washington, D.C. 20515-6612

HAND DELIVERED

U.S. HOUSE OF REPRESENTATIVES
2005 JUN 15 PM 3:06
LEGISLATIVE RESOURCE CENTER

Dear Mr. Trandahl,

Upon further review of my 2004 Financial Disclosure Report, I realized that I inadvertently omitted the attached documents. Therefore, please consider this an amendment to that report.

Sincerely,

David Scott
Member of Congress

DS:dmt

WASHINGTON OFFICE:
417 CANNON HOUSE OFFICE BUILDING
WASHINGTON, DC 20515-1013
PHONE: (202) 225-2939
FAX: (202) 225-4628

JONESBORO OFFICE:
173 NORTH MAIN STREET
JONESBORO, GA 30236
PHONE: (770) 210-5673
FAX: (770) 210-5673

LILBURN OFFICE:
127 MAIN STREET
LILBURN, GA 30047
PHONE: (770) 381-0135
FAX: (770) 381-1823

UBS Financial Services Inc.
3455 PEACHTREE RD, NE
SUITE 1700
ATLANTA, GA 30326

Your Financial Advisor
H TIMOTHY MCKANE
404-760-3000/800-234-9928

PZAB069079-X6 - 1204 - AX - 0

Resource Management Account®

H

PZAB069079-X6
8657560 - 000002

Account Number: [redacted]

DAVID A SCOTT &
ALFREDIA A SCOTT JT TEN
162 HURT STREET NE
ATLANTA GA 30307-2538

2004 Year-End Summary
Important Tax-Planning Information

Please keep this statement for use with your tax-reporting documents, e.g., 1099, 5498, etc.

Activity highlights

		Year-to-date
Deposits	$	49,140.15
Withdrawals		-22,000.00
Money fund checks paid		-28,721.86
Loan/Late payment interest charged		-760.00
Resource Management Account fee		-125.00
Miscellaneous charges and adjustments		-15.00
Net change from activity listed above	$	**-2,481.71**

Portfolio summary

		Year-to-date
Opening value	$	69,877.00
Net change from Activity Highlights		-2,481.71
Net security earnings		1,833.22
Change in value of investments		-3,985.08
Value on December 31	$	**65,243.43**

Earnings summary

		Paid in 2004
Taxable		
Dividends	$	1,833.10
Interest		.12
Total taxable security earnings	$	**1,833.22**
Total current year security earnings	$	**1,833.22**
Net security earnings	$	**1,833.22**

Important message:
Clients with account balances or activity in December should refer to the monthly statement following the Year-End Summary

4479

Account Number: A[redacted]
Your Financial Advisor
H TIMOTHY MCKANE
404-760-3000/800-234-9928

Resource Management Account®

Statement Period: 2004 Year-End Summary

PZAB069080-X6
8657560 - 000003

2004 Realized gains and losses

Estimated 2004 gains and losses for transactions with trade dates through 12/31/04 have been incorporated into this statement. The oldest security lot is liquidated first to calculate gains/losses (first-in, first-out or FIFO accounting method) unless you specified which lot to close when you placed your order (a versus purchase or VSP order). An asterisk (*) indicates a UBS Financial Services adjustment to cost basis. The number "1" indicates cost basis information has been provided by a source other than UBS Financial Services. See the back of the first page for additional information. This information is provided for informational purposes only and should not be relied upon for tax-filing purposes. Rely only on year-end tax forms when preparing your tax return. Gains/losses may not be adjusted for all capital changes. Cost basis for tax-exempt and AMT eligible coupon municipal securities has been adjusted automatically for estimated amortization of bond premiums. Estimates in the "Unclassified" section can not be classified as short-term or long-term due to missing information or the product is one for which a gain/loss calculation is not provided.

Security description	Method	Quantity/ Face value	Purchase date	Sale date	Sale amount	Purchase amount	Loss	Gain	Net gain/loss
Short-term capital gains and losses:									
COCA COLA CO COM	FIFO	96.000	10/21/03	03/11/04	$ 4,612.65	$ 4,502.14		$ 110.51	
INTEL CORP	FIFO	145.000	08/21/03	03/11/04	3,679.06	3,893.02	-13.96		
	FIFO	39.000	01/02/04	03/11/04	1,043.33	1,301.55	-258.22		
Total					$ 9,535.04	$ 9,696.71	$ -272.18	$ 110.51	$ -161.67
Net capital gains/losses:									$ -161.67

2004 Realized capital gain/loss summary

Short-term gains/losses:	$ -161.67

Checking summary

Uncoded checks

Check number	Description	Date	Amount
00151	BANK AMERICA	10/07	5,721.86
00152	DAYN MARK ADVERTISING	10/15	10,000.00
00153	DAYN MARE ADVERTISING	10/28	12,000.00
00154	DAVID AND ALFREDIA SCOTT	12/14	1,000.00

UBS Financial Services Inc.
3455 PEACHTREE RD, NE
SUITE 1700
ATLANTA, GA 30326

Your Financial Advisor
H TIMOTHY MCKANE
404-760-3000/800-234-9928

Resource Management Account®

E

PZAB069081-X8
8657560 - 000004

Account Number: [redacted]

DAVID A SCOTT &
ALFREDIA A SCOTT JT TEN
162 HURT STREET NE
ATLANTA GA 30307-2538

December 2004

This month at a glance

Value on November 30	$ 59,521.16
Value on December 31	**$ 65,243.43**
Debit balance in 12/31 value	$ -32,772.29

Activity highlights

	Current period	Year-to-date
Deposits	$ 2,140.15	$ 49,140.15
Withdrawals	.00	-22,000.00
Money fund checks paid	-1,000.00	-28,721.86
Loan/Late payment interest charged	-293.86	-760.00
Resource Management Account fee	.00	-125.00
Miscellaneous charges and adjustments	.00	-15.00
Net change from activity listed above	**$ 846.29**	**$ -2,481.71**

Portfolio summary

	Current period	Year-to-date
Opening value	$ 59,521.16	$ 69,877.00
Net change from Activity Highlights	846.29	-2,481.71
Net security earnings	1,089.65	1,833.22
Change in value of investments	3,786.33	-3,985.08
Value on December 31	**$ 65,243.43**	**$ 65,243.43**

Bulletin Board
PLEASE READ THE IMPORTANT INFORMATION
ENCLOSED WITH YOUR STATEMENT. IT INCLUDES
OUR MARKET OUTLOOK FOR 2005 AS WELL AS
INFORMATION ABOUT YOUR ACCOUNT(S).
RESOURCELINE 1-800-RMA-1000: ACCOUNT #. 020039555
VISIT OUR WEB SITE AT WWW.UBS.COM.

Asset summary

Refer to the disclosure on the back of the first page for information on assets excluded from this summary.

	% of portfolio	Value
Equities	100.00	98,015.72
Less debit balance		-32,772.29
Value on December 31		**$ 65,243.43**

4481

Account Number: [redacted]7
Your Financial Advisor
H TIMOTHY MCKANE
404-760-3000/800-234-9928

Resource Management Account®

H

Statement Period: December 2004

PZA8069082-X6
8657560 - 000005

Earnings summary

Earnings below are classified as taxable or non-taxable based on the tax status for the specific security on which the earnings are received and does not attempt to reflect your account's tax status or reporting requirements. Use only official tax reporting documents (e.g. 1099) for tax reporting purposes. The classification of private investment distributions can only be determined by referring to the official year-end tax reporting document provided by the issuer.

	Current period	Year-to-date
Taxable		
Dividends	$ 1,089.65	$ 1,833.10
Interest	.00	.12
Total taxable security earnings	$ 1,089.65	$ 1,833.22
Total current year security earnings	$ 1,089.65	$ 1,833.22
Net security earnings	$ 1,089.65	$ 1,833.22

Loan summary

Loan balance November 22	$	34,708
Loan balance December 31	$	32,772
Average loan balance	$	33,803
Closing account balance Dec 31	$	-32,772
Number of loan (debit) days		40
Loan interest period		11/22 - 12/31
Average loan interest rate		7.823 %
Loan interest charged this period	$	293.86
Year-to-date loan interest	$	760.00

Investment objectives

The following return objective and risk profile(s) describe overall goals for this account. For each account held, you must provide one return objective, one primary risk profile and, if applicable, a secondary risk profile. A full description of the alternatives is included on the back of the first page. If you have questions regarding these objectives, disagree with or wish to change them, please notify your Financial Advisor or Branch Manager at your branch office, in writing or by telephone.

Return objective: Capital appreciation

Risk profile: Primary: Moderate Secondary: None selected

Asset portfolio

When available, prices, income and current values may be approximate and thus gains/losses may not be accurately reflected. An asterisk (*) indicates the calculation of unrealized gains/losses based upon a UBS Financial Services adjustment to cost basis. The number "1" indicates cost basis information has been provided by a source other than UBS Financial Services. See the back of the first page for additional information. Gains/losses are not calculated for zero coupon investments. "Pending adjustments" or "P/A" indicates cost basis has not yet been allocated as a result of a spin-off or taxable exchange.

Equities

Common stock

Total shares	Description	Price	Current value	Est. annual income	Trade date	Shares purchased	Purchase price	Cost basis	Unrealized Gain/loss
150	AFLAC INC	39.840	5,976.00	57	10/21/03	150.000	35.540	5,462	514
400	CISCO SYS INC	19.320	7,728.00		10/21/03	200.000	21.090	4,350	-486
					01/02/04	200.000	24.469	5,037	-1,173
154	COCA COLA CO COM	41.640	6,412.56	154	10/21/03	54.000	45.810	2,532	-283
					01/02/04	100.000	50.820	5,198	-1,034
100	GENENTECH INC	54.440	5,444.00		03/11/04	100.000	53.150	5,431	13
230	GENL ELECTRIC CO	36.500	8,395.00	202	08/21/03	130.000	29.810	3,983	762

Continued on page 3

Common stock - continued

Total shares	Description	Price	Current value	Est. annual income	Trade date	Shares purchased	Purchase price	Cost basis	Unrealized Gain/loss
					12/30/03	100.000	30.680	3,166	484
220	HOME DEPOT INC	42.740	9,402.80	75	08/21/03	120.000	32.610	4,021	1,107
					01/02/04	100.000	35.740	3,681	593
161	INTEL CORP	23.390	3,765.79	52	01/02/04	161.000	32.539	5,373	-1,607
96	JOHNSON & JOHNSON COM	63.420	6,088.32	109	08/21/03	96.000	49.690	4,886	1,202
125	MEDTRONIC INC	49.670	6,208.75	42	08/21/03	75.000	51.700	3,985	-259
					10/21/03	50.000	46.470	2,409	74
280	MICROSOFT CORP	26.720	7,481.60	90	08/21/03	180.000	26.300	4,855	-45
					12/30/03	100.000	27.489	2,841	-169
540	NEXTEL COMMUNICATIONS INC CL A	30.010	16,205.40		08/21/03	240.000	18.299	4,527	2,675
					12/30/03	100.000	27.779	2,870	131
					01/02/04	200.000	27.999	5,752	250
350	PFIZER INC	26.890	9,411.50	266	10/21/03	150.000	31.430	4,835	-801
					12/30/03	100.000	34.940	3,600	-911
					01/02/04	100.000	35.860	3,694	-1,005
100	PRUDENTIAL FINANCIAL INC	54.960	5,496.00	63	03/11/04	100.000	45.220	4,638	858
	Total	**$**	**98,015.72**	**1,110**				**97,126**	**890**

Research Opinions

*Independent, third-party research on certain companies covered by UBS Research is available to customers of UBS in the United States at no cost. Customers can access this research at www.ubs.com/independentresearch or can call 1-877-208-5700 to request that a copy of this research be sent to them. Research ratings are as of the end of the statement period. For cases where UBS dropped coverage on a company, ratings are as of the date coverage was dropped. Independent research will continue to be available for 18 months after UBS dropped coverage. Please consult the independent research website for the most current rating information. * indicates the rating for this stock may have been placed Under Review by the analyst, may be subject to a Rating/Return divergence or may have an exception to the core rating bands. ' indicates recommendation and price target information temporarily suspended pending review. For further information please refer to the "Research Rating Exceptions" daily report or contact your Financial Advisor.*

AFLAC INC		
UBS	SABRIENT SYSTEMS	
REDUCE/LOWER PREDICTABILITY	BUY	
CISCO SYS INC		
UBS	MATTERHORN GROUP	KLD RSCH & ANALYTICS
NEUTRAL/HIGHER PREDICTABILITY	BUY	BUY
RATINGS EXCEPTION*		
COCA COLA CO COM		
UBS	ARGUS FUNDAMENTAL	KLD RSCH & ANALYTICS
REDUCE/HIGHER PREDICTABILITY	BUY	HOLD

Continued on page 4

Research Opinions - continued

GENENTECH INC		
UBS	CHANNEL TREND INC.	
NEUTRAL/LOWER PREDICTABILITY	HOLD	
GENL ELECTRIC CO		
UBS	ARGUS FUNDAMENTAL	KLD RSCH & ANALYTICS
BUY/HIGHER PREDICTABILITY	BUY	SELL
HOME DEPOT INC		
UBS	ARGUS FUNDAMENTAL	KLD RSCH & ANALYTICS
BUY/HIGHER PREDICTABILITY	BUY	HOLD
INTEL CORP		
UBS	MATTERHORN GROUP	KLD RSCH & ANALYTICS
BUY/LOWER PREDICTABILITY	SELL	BUY
JOHNSON & JOHNSON COM		
UBS	ARGUS FUNDAMENTAL	KLD RSCH & ANALYTICS
NOT RATED	HOLD	HOLD
MEDTRONIC INC		
UBS	SILICON VALLEY RSCHGRP	KLD RSCH & ANALYTICS
NOT RATED	HOLD	BUY
MICROSOFT CORP		
UBS	TIER 1 RESEARCH	KLD RSCH & ANALYTICS
BUY/HIGHER PREDICTABILITY	BUY	HOLD
NEXTEL COMMUNICATIONS INC CL A		
UBS	PRICE TARGET RESEARCH	
BUY/LOWER PREDICTABILITY	BUY	
PFIZER INC		
UBS	ARGUS FUNDAMENTAL	KLD RSCH & ANALYTICS
BUY/HIGHER PREDICTABILITY	BUY	SELL
RATINGS EXCEPTION*		
PRUDENTIAL FINANCIAL INC		
UBS	SABRIENT SYSTEMS	
BUY/LOWER PREDICTABILITY	BUY	
RATINGS EXCEPTION*		

4484

Account Number: [redacted]
Your Financial Advisor
H TIMOTHY MCKANE
404-760-3000/800-234-9928

Resource Management Account®

Statement Period: December 2004

PZA069085-X6
8657560 - 000008

Monthly activity

Cash flow

Date	Activity	Description	Amount
11/30		**Balance forward**	**$ -34,708.23**
12/01	DIVIDEND	AFLAC INC	14.25
		PAID ON 150	
12/01	DIVIDEND	INTEL CORP	6.44
		PAID ON 161	
12/02	DIVIDEND	MICROSOFT CORP	862.40
		PAID ON 260	
12/03	DIVIDEND	PFIZER INC	59.50
		PAID ON 350	
12/07	DIVIDEND	JOHNSON & JOHNSON COM	27.36
		PAID ON 98	
12/14	RMA CHECK	CHECK PAID 000154	-1,000.00
12/15	DIVIDEND	COCA COLA CO COM	38.50
		PAID ON 154	
12/16	DIVIDEND	HOME DEPOT INC	18.70
		PAID ON 220	
12/20	DIVIDEND	PRUDENTIAL FINANCIAL INC	62.50
		PAID ON 100	
12/21	TRANSFER	FM AX 83983 3100	2,140.15
12/31	LOAN CHARGE	LOAN INTEREST CHARGED	-293.86
12/31		**Closing balance**	**$ -32,772.29**

Loan interest reconciliation

Date	Number of days	Average debit balance	Rate	Loan interest charged
11/22	8	$ 34,708	7.625 %	$ 58.81
11/30	32	33,577	7.875 %	235.05
Total	40			**$ 293.86**

Checking/bill payment summary

Check number	Description	Date	Expense code	Amount
00000154	DAVID AND ALFREDIA SCOTT	12/14		1,000.00
		Total checks paid		**$ 1,000.00**

UBS Financial Services Inc.
3455 PEACHTREE RD, NE
SUITE 1700
ATLANTA, GA 30326

PZAB069086-X8 • 1204 - AX - 0

Your Financial Advisor
H TIMOTHY MCKANE
404-760-3000/800-234-9928

Resource Management Account®

PZAB069086-X6
8657560 - 000009

Account Number: [redacted]

DAVID A SCOTT &
ALFREDIA A SCOTT JT TEN
162 HURT STRET NE
ATLANTA GA 30307-2538

2004 Year-End Summary
Important Tax-Planning Information

Please keep this statement for use with your tax-reporting documents, e.g., 1099, 5498, etc.

Activity highlights

		Year-to-date
Withdrawals	$	-2,140.15
Net change from activity listed above	$	-2,140.15

Portfolio summary

		Year-to-date
Opening value	$	2,125.85
Net change from Activity Highlights		-2,140.15
Net security earnings		16.83
Value on December 31	$	2.53

Earnings summary

		Paid in 2004
Taxable		
UBS Money fund dividends	$	16.59
Total taxable security earnings	$	16.59
Total current year security earnings	$	16.59
Prior year(s) adjustments		.24
Net security earnings	$	16.83

Important message:
Clients with account balances or activity in December should refer to the monthly statement following the Year-End Summary.

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UBS Financial Services Inc.
3455 PEACHTREE RD, NE
SUITE 1700
ATLANTA, GA 30326

Your Financial Advisor
H TIMOTHY MCKANE
404-760-3000/800-234-9928

Resource Management Account®

[redacted]

PZAB069087-X6
8657560 - 000010

Account Number: [redacted]

DAVID A SCOTT &
ALFREDIA A SCOTT JT TEN
162 HURT STRET NE
ATLANTA GA 30307-2538

December 2004

This month at a glance

Value on November 30	$	2,140.15
Value on December 31	$	**2.53**
Money fund and other sweep option balance in 12/31 value	$	2.53

Activity highlights

	Current period	Year-to-date
Withdrawals	$ -2,140.15	$ -2,140.15
Net change from activity listed above	$ -2,140.15	$ -2,140.15

Portfolio summary

	Current period	Year-to-date
Opening value	$ 2,140.15	$ 2,125.85
Net change from Activity Highlights	-2,140.15	-2,140.15
Net security earnings	2.53	16.83
Value on December 31	$ 2.53	$ 2.53

Earnings summary

Earnings below are classified as taxable or non-taxable based on the tax status for the specific security on which the earnings are received and does not attempt to reflect your account's tax status or reporting requirements. Use only official tax reporting documents (e.g. 1099) for tax reporting purposes. The classification of private investment distributions can only be determined by referring to the official year-end tax reporting document provided by the issuer.

	Current period	Year-to-date
Taxable		
UBS Money fund dividends	$ 2.53	$ 16.59
Total taxable security earnings	$ 2.53	$ 16.59
Total current year security earnings	$ 2.53	$ 16.59
Prior year(s) adjustments	.00	.24
Net security earnings	$ 2.53	$ 16.83

Bulletin Board

PLEASE READ THE IMPORTANT INFORMATION
ENCLOSED WITH YOUR STATEMENT. IT INCLUDES
OUR MARKET OUTLOOK FOR 2005 AS WELL AS
INFORMATION ABOUT YOUR ACCOUNT(S)

RESOURCELINE 1-800-RMA-1000: ACCOUNT #: 020083983
VISIT OUR WEB SITE AT WWW.UBS.COM

Asset summary

Refer to the disclosure on the back of the first page for information on assets excluded from this summary.

	% of portfolio	Value
Money funds/sweep options	100.00	2.53
Value on December 31		$ 2.53

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Account Number: [redacted]
Your Financial Advisor
H TIMOTHY MCKANE
404-760-3000/800-234-9928

Resource Management Account®

Statement Period: December 2004

PZAB069088-X6
8657560 - 000011

Investment objectives

The following return objective and risk profile(s) describe overall goals for this account. For each account held, you must provide one return objective, one primary risk profile and, if applicable, a secondary risk profile. A full description of the alternatives is included on the back of the first page. If you have questions regarding these objectives, disagree with or wish to change them, please notify your Financial Advisor or Branch Manager at your branch office, in writing or by telephone.

Return objective: Capital appreciation

Risk profile: Primary: Moderate Secondary: None selected

Asset portfolio

When available, prices, income and current values may be approximate and thus gains/losses may not be accurately reflected. An asterisk (*) indicates the calculation of unrealized gains/losses based upon a UBS Financial Services adjustment to cost basis. The number "1" indicates cost basis information has been provided by a source other than UBS Financial Services. See the back of the first page for additional information. Gains/losses are not calculated for zero coupon investments. "Pending adjustments" or "P/A" indicates cost basis has not yet been allocated as a result of a spin-off or taxable exchange.

Money funds and other sweep options

Description	Opening balance	Closing balance	Closing share price	Average rate	Dividend/ interest period	Days in period
RMA MONEY MKT. PORTFOLIO	2,140.15	.00	1.00	1.56%	11/23 - 12/26	34
UBS BANK USA DEP ACCT	.00	2.53	N/A	0.84%	11/23 - 12/26	34
Total	$ 2,140.15	$ 2.53				

Notice of Availability

Independent, third party research on certain companies covered by UBS Research is available to customers of UBS in the United States at no cost. Customers can access this research at www.ubs.com/independentresearch or can call 1-877-208-5700 to request that a copy of this research be sent to them.

Monthly activity

Cash flow

Date	Activity	Description	Amount
11/30		**Balance forward**	$ .00
12/21	TRANSFER	TO AX 39555 2100	-2,140.15
12/28	DIVIDEND	RMA MONEY MKT. PORTFOLIO	2.53
		Proceeds from money fund/sweep trans.	$ 2,140.15
		Funds used for money fund/sweep trans.	$ -2.53
12/31		**Closing balance**	$ .00

Account Number: A[redacted]
Your Financial Advisor
H TIMOTHY MCKANE
404-760-3000/800-234-9928

Resource Management Account®

Statement Period: December 2004

PZAB069089-X6
8657560 - 000012

Money funds and other sweep options

The UBS Bank USA Deposit Account is your primary sweep option.

Date	Activity	Money fund/sweep option		Amount
11/30		**Opening RMA Money Mkt. Portfolio**	$	2,140.15
12/22	SOLD	RMA MONEY MKT. PORTFOLIO		-2,140.15
		AS OF 12/21/04		
12/31		**Closing RMA Money Mkt. Portfolio**	$	.00
11/30		**Opening UBS Bank USA Deposit Account**	$	.00

Date	Activity	Money fund/sweep option		Amount
12/29	DEPOSIT	UBS BANK USA DEPOSIT ACCOUNT		2.53
12/31		**Closing UBS Bank USA Deposit Account**	$	2.53
		Sweep option purchased/deposited	$	2.53
		Sweep option sold/withdrawn	$	-2,140.15

UBS Financial Services Inc.
3455 PEACHTREE RD, NE
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ATLANTA, GA 30326

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Your Financial Advisor
H TIMOTHY MCKANE
404-760-3000/800-234-9928

Retirement Account

H

PZAB069090-X6
8657560 - 000013

Account Number: [redacted]

Account Type: Individual Retirement Account

DAVID A SCOTT
162 HURT STREET NE
ATLANTA GA 30307-2538

December 2004

This month at a glance

Value on November 30	$	8,945.88
Value on December 31	$	**9,132.88**
Debit balance in 12/31 value	$	-119.12

Asset summary

Refer to the disclosure on the back of the first page for information on assets excluded from this summary.

	% of portfolio	Value
Equities	100.00	9,252.00
Less debit balance		-119.12
Value on December 31		$ **9,132.88**

Investment objectives

Investment objectives describe the overall goals you have for this account. UBS Financial Services Inc. has new Investment objectives, which include a return objective and a primary and, if applicable, secondary risk profile. A description of the alternatives is included on the back of the first page. Please contact your Financial Advisor or Branch Manager at your branch office to update your account objectives.

1. Growth 2. Income 3. 4.

Account Instructions

UBS Financial Services Inc. is your custodian

Bulletin Board

PLEASE READ THE IMPORTANT INFORMATION
ENCLOSED WITH YOUR STATEMENT. IT INCLUDES
OUR MARKET OUTLOOK FOR 2005 AS WELL AS
INFORMATION ABOUT YOUR ACCOUNT(S).
VISIT OUR WEB SITE AT WWW.UBS.COM.

Asset portfolio

Prices, income and current values may be approximate. Refer to the disclosure on the back of the first page.

Quantity/face value	Description	Contract premium	Price	Current value	Est. income
180	ORACLE CORP		13.720	2,469.60	
180	YAHOO INC		37.680	6,782.40	
	Total			$ **9,252.00**	

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Research Opinions

*Independent, third-party research on certain companies covered by UBS Research is available to customers of UBS in the United States at no cost. Customers can access this research at www.ubs.com/independentresearch or can call 1-877-208-5700 to request that a copy of this research be sent to them. Research ratings are as of the end of the statement period. For cases where UBS dropped coverage on a company, ratings are as of the date coverage was dropped. Independent research will continue to be available for 18 months after UBS dropped coverage. Please consult the independent research website for the most current rating information. * indicates the rating for this stock may have been placed Under Review by the analyst, may be subject to a Rating/Return divergence or may have an exception to the core rating bands. ^ indicates recommendation and price target information temporarily suspended pending review. For further information please refer to the "Research Rating Exceptions" daily report or contact your Financial Advisor.*

ORACLE CORP		
UBS	ARGUS FUNDAMENTAL	KLD RSCH & ANALYTICS
BUY/HIGHER PREDICTABILITY	BUY	BUY
YAHOO INC		
UBS	VALUENGINE, INC	
NEUTRAL/LOWER PREDICTABILITY	BUY	
RATINGS EXCEPTION*		

Activity

Refer to the disclosure on the back of the first page regarding the Price/Value presented for restricted securities.

Date Activity	Description	Quantity	Price / Value / Comment	Amount
11/30	**Balance forward**		$	-119.12
12/31	**Closing balance**		$	-119.12

IRA beneficiary information

To ensure your IRA assets are distributed as you wish, it is crucial that your beneficiary designation is up-to-date. Contact your Financial Advisor to ensure that UBS Financial Services Inc. has the most current beneficiary information for your account and to have your beneficiary information appear on your statement.

2004 Year-End valuation statement - Form 5498

Retain this statement as your year-end valuation. If your Asset portfolio includes Insurance products, Private Investments, IRA special products or Other assets or if you own Outside assets that do not appear on this statement, we will automatically provide you with an updated year-end valuation in January 2005. This 2004 year-end value of your IRA (or the updated value, if applicable) will be furnished to the Internal Revenue Service.

December 31 value	$	9,132.88

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UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

Robert C. Scott
(Full Name)

7501 River Road, Suite 2-G Newport News, VA 23607-1767
(Mailing Address)

(757) 380-1000
Daytime Telephone:

(Office Use Only)

Filer Status	☑ Member of the U.S. House of Representatives	State: VA District: 3rd	☐ Officer Or Employee — Employing Office
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☐ No ☑	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? If yes, complete and attach Schedule VII.	Yes ☐ No ☑	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Robert C. Scott	5/16/05

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Robert C. Scott

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	ABN AMRO Growth Fund Class N	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	ABN AMRO Montag & Caldwell Growth Fund CL N	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	ABN AMRO Veredus Aggressive Growth Fund CL N	$1,001 - $15,000	None	NONE	P
	ABN AMRO Veredus Scitech Fund Class N	$1,001 - $15,000	None	NONE	P
	AFLAC stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	AMCAP Fd Inc Cl C	$1,001 - $15,000	CAPITAL GAINS	$1 - $200	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Robert C. Scott

	American Express stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	American Int'l Group stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Ameristock Mutual Fund	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$1 - $200	PS
	Ariel (Growth) Fund	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$1 - $200	P
	Ariel Appreciation Fund	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$1 - $200	P
	Audible stock	$1,001 - $15,000	CAPITAL GAINS	$5,001 - $15,000	PS
	Automatic Data Processing stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Bridgwy Blue Chip 35 Index Fund	$1,001 - $15,000	None	NONE	P
	Brown Cap Mgmt Equity Fund	$1,001 - $15,000	None	NONE	
	Brown Capital Mgmt Small Co Fund	$1,001 - $15,000	None	NONE	
	Capital Fund Amer Inc CL C	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$1 - $200	P
	Carnival stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Coca-Cola stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Connecticut Mutual Contrafund	$1,001 - $15,000	None	NONE	PS

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Robert C. Scott

	Connecticut Mutual Growth	$1,001 - $15,000	None	NONE	PS
	Connecticut Mutual Income	$1,001 - $15,000	None	NONE	S
	Connecticut Mutual Income & Growth	$1,001 - $15,000	None	NONE	PS
	Connecticut Mutual Int'l Growth	$1,001 - $15,000	None	NONE	PS
	Connecticut Mutual Main Street Fund	$1,001 - $15,000	None	NONE	PS
	Connecticut Mutual Mid-Cap	$1,001 - $15,000	None	NONE	PS
	Connecticut Mutual Total Return	$1,001 - $15,000	None	NONE	S
	Dionex stock	$1,001 - $15,000	None	NONE	
	Disney (Walt) stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	Dodge & Cox Balanced Fund	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$1 - $200	P
	Dodge & Cox Stock Fund	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$201 - $1,000	P
	Dollar General stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Dollar Tree stock	$1,001 - $15,000	None	NONE	
	Domini Social Equity Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Robert C. Scott

	Edgar Lomax Value Fund	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$1 - $200	P
	Federal Signal stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	Fidelity Dividend Growth Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	Fidelity Low Priced Stock Fund	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$201 - $1,000	P
	General Electric stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Growth Fund Amer CL C	$1,001 - $15,000	None	NONE	P
	Harbor Capital Appreciation Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	Hershey Foods stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Home Depot stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	IBM stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Johnson & Johnson stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Julius Baer Int'l Equity Fund	$1,001 - $15,000	None	NONE	P
	Legg Mason Emerging Markets Fund	$1,001 - $15,000	CAPITAL GAINS	$201 - $1,000	P
	Legg Mason Growth Trust Fund (formerly LM Focus Trust Fund)	$1,001 - $15,000	None	NONE	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Robert C. Scott

	Legg Mason Opportunity Trust Fund	$1,001 - $15,000	None	NONE	P
	Legg Mason Special Investment Trust Fund	$1,001 - $15,000	CAPITAL GAINS	$201 - $1,000	P
	Legg Mason Value Trust Fund	$1,001 - $15,000	None	NONE	P
	Mairs & Power Balance Fund	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$1 - $200	P
	Mairs & Power Growth Fund	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$1 - $200	P
	Marsico Focus Fund	$1,001 - $15,000	CAPITAL GAINS	$1 - $200	S
	McDonalds stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Northeast Investors Growth Fund	$15,001 - $50,000	DIVIDENDS	$1 - $200	P
	Oakmark Select Fund	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$201 - $1,000	PS
	Paychex stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	Peninsula Profit Pros Investment Club (No individual stock reportable transactions or assets)	$1,001 - $15,000	DIVIDENDS/INTEREST/CAPITAL GAINS	$201 - $1,000	P
	Praxair stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	Professional Investment Associates Investment Club (Reportable transactions listed under individual stocks)	$50,001 - $100,000	DIVIDENDS/INTEREST/CAPITAL GAINS	$1,001 - $2,500	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Robert C. Scott

	Profit Value Fund	$1,001 - $15,000	None	NONE	P
	RPM Int'l stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Selected American Shares Fund	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$1 - $200	P
	Sigma Aldrich stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Sun Trust Banks stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	Synovus Financial stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Third Avenue Int'l Value Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	TIAA-CREF Growth & Income Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	TIAA-CREF Growth Equity Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	TIAA-CREF Social Choice Equity Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	Torray Fund	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$201 - $1,000	P
	Wal-Mart stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Washington Mutual Investors Fund CL C	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$1 - $200	P
	Weitz Value Portfolio Fund	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$201 - $1,000	PS

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Robert C. Scott

	William Blair Int'l Growth Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	PS
	Yum! Brands stock	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	

SCHEDULE IV - TRANSACTIONS

Name Robert C. Scott

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Biomet stock	S	Various transactions less than $1000	$1,001 - $15,000
	Cardinal Health stock	S	Various transactions less than $1000	$1,001 - $15,000
	Cardinal Health stock	S	04-30-04	$1,001 - $15,000
	Colgate-Palmolive stock	S	Various transactions less than $1000	$1,001 - $15,000
	Automatic Data Processing stock	S	Various transactions less than $1000	$1,001 - $15,000
	Audible stock	S	Various transactions less than $1000	$15,001 - $50,000
	Audible stock	S	08-17-04	$1,001 - $15,000
	Amazon.com stock	S	Various transactions less than $1000	$1,001 - $15,000
	Washington Mutual stock	S	04-30-04	$1,001 - $15,000
	Amazon.com stock	S	04-30-04	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name Robert C Scott

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Colgate-Palmolive stock	S	04-30-04	$1,001 - $15,000
	Wendy's stock	S	Various transactions less than $1000	$1,001 - $15,000
	Wendy's stock	S	04-30-04	$1,001 - $15,000
	Amazon.com stock	P	Various transactions less than $1000	$1,001 - $15,000
	Audible stock	P	01-02-04	$1,001 - $15,000
	Audible stock	P	08-18-04	$1,001 - $15,000
	Colgate-Palmolive stock	P	Various transactions less than $1000	$1,001 - $15,000
	Dodge & Cox Balanced Fund	P	04-08-04	$1,001 - $15,000
	Dodge & Cox Balanced Fund	P	04-12-04	$1,001 - $15,000
	Washington Mutual stock	P	Various transactions less than $1000	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name Robert C. Scott

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Oakmark Select Fund	S	Various transactions less than $1000	$1,001 - $15,000
	Julius Baer Int'l Equity Fund	P	12-30-04	$1,001 - $15,000
	Selected American Shares Fund	P	Various transactions less than $1000	$1,001 - $15,000
	Third Avenue Int'l Value Fund	P	Various transactions less than $1000	$1,001 - $15,000
	Northeast Investors Growth Fund	P	Various transactions less than $1000	$1,001 - $15,000
	Harbor Capital Appreciation Fund	P	Various transactions less than $1000	$1,001 - $15,000
	Firsthand FDS Technology Value Fund	S	Various transactions less than $1000	$1,001 - $15,000
	Firsthand FDS Technology Value Fund	S	04-15-04	$1,001 - $15,000
	Weitz Value Portfolio Fund	S	Various transactions less than $1000	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name Robert C. Scott

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	White Oak Growth Stock Fund	S	Various transactions less than $1000	$1,001 - $15,000
	Ameristock Mutual Fund	S	Various transactions less than $1000	$1,001 - $15,000
	Marsico Focus Fund	S	Various transactions less than $1000	$1,001 - $15,000
	Edgar Lomax Value Fund	P	06-01-04	$1,001 - $15,000
	Edgar Lomax Value Fund	P	Various transactions less than $1000	$1,001 - $15,000
	Applebees Int'l stock	S	03-16-04	$1,001 - $15,000
	Dollar Tree stock	P	03-16-04	$1,001 - $15,000
	AMCAP Fund CL C	P	03-16-04	$1,001 - $15,000
	Capital Income Builder CL A	P	04-16-04	$1,001 - $15,000
	Growth Fund America CL C	P	03-16-04	$1,001 - $15,000
	Washington Mutual Investors Fund CL C	P	03-16-04	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name Robert C. Scott

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Peninsula Profit Pros Investment Club	P	Various transactions less than $1000	$1,001 - $15,000
	Professional Investment Associates Investment Club	P	Various transactions less than $1000	$1,001 - $15,000
	Bridgeway Blue Chip 35 Index Fund	P	Various transactions less than $1,000	$1,001 - $15,000

SCHEDULE V - LIABILITIES

Name Robert C. Scott

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Wachovia Securities	Margin account interest	$10,001 - $15,000
	American Express	credit card	$15,001 - $50,000
	Congressional Federal Credit Union	credit card	$10,001 - $15,000
	Legg Mason Brokerage Account	Margin account interest	$15,001 - $50,000
	Fidelity Investments Brokerage Account	Margin account interest	$15,001 - $50,000
	TDWaterhouse Brokerage Account	Margin account interest	$15,001 - $50,000
	BrownCo Brokerage Account	Margin account interest	$10,001 - $15,000

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	NATIONAL BAR Association	AUG 10-12	WASH. D.C	Y	Y	N	N
	NAACP	July 10-11	(travel not reimbursed)	Y	Yes	N	N

This page may be copied if more space is required.

SCHEDULE VIII - POSITIONS

Name Robert C. Scott

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board Member	Hampton Roads March of Dimes

ROBERT C. "BOBBY" SCOTT
3RD DISTRICT, VIRGINIA

1201 LONGWORTH HOUSE OFFICE BUILDING
WASHINGTON, DC 20515–4603
(202) 225–8351

COMMITTEES
JUDICIARY
SUBCOMMITTEES
CRIME, RANKING MEMBER
THE CONSTITUTION

EDUCATION AND THE WORKFORCE

Congress of the United States
House of Representatives
Washington, DC 20515–4603

DISTRICT OFFICES:

NEWPORT NEWS:
2600 WASHINGTON AVENUE
SUITE 1010
NEWPORT NEWS, VA 23607
(757) 380–1000

RICHMOND:
THE JACKSON CENTER
501 NORTH 2ND STREET
SUITE 401
RICHMOND, VA 23219–1321
(804) 644–4845

www.house.gov/scott

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LEGISLATIVE RESOURCE CENTER
2005 JUN 15 PM 3:58
U.S. HOUSE OF REPRESENTATIVES

MC

June 15, 2005

The Clerk, U.S. House of Representatives
Legislative Resource Center
B106 Cannon House Office Building
Washington, DC 20515-6612

RE: Robert C. Scott, 2004 Financial Disclosure

Gentlemen:

While reviewing my 2004 Financial Disclosure Statement, I discovered two items that needed to be corrected.

- Page 1 Item VI, the answer should be (yes)
- Page 15 National Bar Association conference in Charlotte, NC
- Page 15 NAACP conference in Philadelphia, PA (travel not reimbursed)

Very truly yours,

Robert C. "Bobby" Scott

PRINTED ON RECYCLED PAPER

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LEGISLATIVE RESOURCE CENTER
2005 MAY 12 PM 12:59
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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A

For use by Members, officers, and employees

The Honorable F. James Sensenbrenner, Jr.
(Full Name)

2449 Rayburn House Office Building Washington, DC 20515
(Mailing Address)

202/225-5101
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representative — State: WI, District: 5	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5/12/05

4509

SCHEDULE I - EARNED INCOME

Name The Honorable F. James Sensenbrenner, Jr.

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Sensenbrenner Family Trust	Trustee Fees	$25,000

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name The Honorable F. James Sensenbrenner, Jr.

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for Income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	3M Co. stock	$100,001 - $250,000	DIVIDENDS	$2,501 - $5,000	
	Abbott Laboratories	$500,001 - $1,000,000	DIVIDENDS	$5,001 - $15,000	
	Agere Systems Class B	$1 - $1,000		NONE	
	Allstate Insurance stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
SP	Altria Group	$250,001 - $500,000	DIVIDENDS	$15,001 - $50,000	
	AT&T stock	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name The Honorable F. James Sensenbrenner, Jr.

	AT&T Wireless	$1,001 - $15,000		NONE	S
SP	Bank One Group Prime Money Market	$50,001 - $100,000	INTEREST	$201 - $1,000	
	Bank One, Milwaukee	$1,001 - $15,000	INTEREST	$201 - $1,000	
	Bell South stock	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	P
	BP PLC	$100,001 - $250,000	DIVIDENDS	$5,001 - $15,000	
	Centerpoint Energy	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Comcast	$1,001 - $15,000		NONE	
	Darden Restaurants	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	Delphi Automotive	$1 - $1,000	DIVIDENDS	$1 - $200	
	Dunn & Bradstreet	$100,001 - $250,000		NONE	
	DuPont Stock	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	
	Eastman Chemical stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Eastman Kodak stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	El Paso Energy	$1,001 - $15,000	DIVIDENDS	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name The Honorable F. James Sensenbrenner, Jr.

	Exxon Mobil stock	$500,001 - $1,000,000	DIVIDENDS	$5,001 - $15,000	
	Gartner Group	$1,001 - $15,000		NONE	
	General Electric	$500,001 - $1,000,000	DIVIDENDS	$5,001 - $15,000	
	General Mills stock	$100,001 - $250,000	DIVIDENDS	$2,501 - $5,000	
	General Motors	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Halliburton stock	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	
	Hospira	$15,001 - $50,000		NONE	
	Hospira	$15,001 - $50,000	DIVIDENDS	NONE	
	Imation	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	IMS Health	$100,001 - $250,000	DIVIDENDS	$201 - $1,000	
DC	JP Morgan Chase (Bank One) in trust	$250,001 - $500,000	INTEREST	$2,501 - $5,000	
	JP Morgan Chase (Bank One)	$100,001 - $250,000	DIVIDENDS	$1,001 - $2,500	
DC	JP Morgan Chase (Bank One) in trust	$250,001 - $500,000	DIVIDENDS	$2,501 - $5,000	
	JP Morgan Chase, IRA	$100,001 - $250,000	N/A	N/A	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name The Honorable F. James Sensenbrenner, Jr.

	Kellogg Corp.	$100,001 - $250,000	DIVIDENDS	$2,501 - $5,000	
DC	Kimberly Clark (in trust)	$500,001 - $1,000,000	DIVIDENDS	$15,001 - $50,000	
DC	Kimberly Clark (in trust)	$500,001 - $1,000,000	DIVIDENDS	$15,001 - $50,000	
	Kimberly Clark stock	$500,001 - $1,000,000	DIVIDENDS	$15,001 - $50,000	S
DC	Lord Abbett Fund	$1,001 - $15,000	DIVIDENDS	NONE	
DC	Lord Abbett Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Lucent Technologies	$1,001 - $15,000		NONE	
	Medco Health (spinoff)	$100,001 - $250,000		NONE	
	Merck & Co. stock	$1,000,001 - $5,000,000	DIVIDENDS	$50,001 - $100,000	
	Monsanto Corp.	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	
	Moody's Corp.	$100,001 - $250,000	DIVIDENDS	$201 - $1,000	
	Morgan Stanley/Dean Whitter	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	NCR Corp.	$1,001 - $15,000		NONE	split
DC	Neenah Paper	$1,001 - $15,000		NONE	spin-off

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name The Honorable F. James Sensenbrenner, Jr.

DC	Neenah Paper	$1,001 - $15,000		NONE	spin-off
	Neenah Paper Co.	$15,001 - $50,000		NONE	spin-off
	Newell Rubbermaid	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
	Pactive Corp. stock	$1,001 - $15,000		NONE	
	Pfizer	$500,001 - $1,000,000	DIVIDENDS	$15,001 - $50,000	
	PG&E	$1,001 - $15,000		NONE	
	Piper Jaffray (spinoff)	$1,001 - $15,000	N/A	NONE	S
	Qwest	$1,001 - $15,000		NONE	
	Reliant Energy	$1,001 - $15,000		NONE	
	RH Donnelly	$15,001 - $50,000		NONE	
	Sandusky Voting Trust	$1 - $1,000		NONE	
	SBC Communications	$50,001 - $100,000	DIVIDENDS	$2,501 - $5,000	P
DC	Schweitzer Maudit (in trust)	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
DC	Schweitzer Maudit (in trust)	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name The Honorable F. James Sensenbrenner, Jr.

	Sears Roebuck	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	See Attachments	N/A	N/A	N/A	
SP	Sensient Technology	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	
	Solutia	$1,001 - $15,000		NONE	
	Tenneco Automotive	$1,001 - $15,000		NONE	
	Texas Genco	$1 - $1,000	DIVIDENDS	$1 - $200	S
	Unisys stock	$1,001 - $15,000		NONE	
	US Bank Corp	$50,001 - $100,000	DIVIDENDS	$2,501 - $5,000	
	Verizon	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	P
	Vodaphone Airtouch	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Weenergies stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Wisconsin State Retirement	$250,001 - $500,000	N/A	N/A	

SCHEDULE IV - TRANSACTIONS

Name The Honorable F. James Sensenbrenner, Jr.

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	US Bank Corp/Piper Jaffray	S	1-2-04 8-4-04	$1,001 - $15,000
	AT&T Wireless	S	12-14-04	$1,001 - $15,000
	AT&T	P	various (drip)	N/A
	Bell South	P	various (drip)	$1,001 - $15,000
	SBC Communications	P	various (drip)	N/A
	Texas Genco	S	12-14-04	N/A
	Kimberly-Clark	S	various	$100,001 - $250,000
	Verizon	P	various (drip)	$1,001 - $15,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name The Honorable F. James Sensenbrenner, Jr.

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
International Management and Development Institute	Feb 17-24	Wash., D.C.-Munich, Germany--Liechetnstein--Wash., D.C.	Y	Y	Y	N/A
Islamic Free Market Institute	Apr. 4-9	Wash., D.C.-Dhoa,, Qaatar-Bahrain-Dubai, U.A.E.-Wash., D.C.	Y	Y	Y	N/A
Natl. Assoc. Broadcasters	Apr. 18-20	Wash.,D.C. - Las Vegas - Wash., D.C.	Y	Y	Y	N/A
Nat. Cable and Telecomm. Assoc.	May 2-4	Wash., D.C. - New Orleans - Wash.,D.C.	Y	Y	Y	N/A
US-Japan Legis. Exchange Program - GW University	Nov. 5-12	Wash., D.C.-Singapore-Tokyo-Wash., D.C.	Y	Y	Y	3 days
Transatlantic Policy Network	Nov. 29-Dec. 5	Wash., D.C. - Paris-Brussels-Wash., D.C.	Y	Y	Y	N/A

SCHEDULE VIII - POSITIONS

Name The Honorable F. James Sensenbrenner, Jr.

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Trustee	Sensenbrenner Family Trust
Co-Trustee	Separate trusts established for benefit of Frank. J. Sensenbrenner, III, and Robert Alan Sensenbrenner

FOOTNOTES

Name The Honorable F. James Sensenbrenner, Jr.

Number	Section / Schedule	Footnote	This note refers to the following item
1	Schedule III	Covanta Energy bankrupt & liquidated	not noted this year
2	Schedule III	Highlands Insurance Group liquidated	not noted this year
3	Schedule III	Pharmacia acquired by Pfizer	Pharmacia not noted this year
3	Schedule III	Bank One became JP Morgan Chase	

JAMES SENSENBRENNER, JR.
FIFTH DISTRICT, WISCONSIN
COMMITTEE ON THE JUDICIARY,
CHAIRMAN

WASHINGTON OFFICE
ROOM 2449
RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515–4905
202–225–5101

DISTRICT OFFICE
120 BISHOPS WAY, ROOM 154
BROOKFIELD, WI 53005–8294
262–784–1111

OUTSIDE MILWAUKEE METRO
CALLING AREA
1–800–242–1119

Congress of the United States
House of Representatives
Washington, DC 20515–4905

MR. SENSENBRENNER. Mr. Speaker, through the following statement, I am making my financial net worth as of March 31, 2005, a matter of public record. I have filed similar statements for each of the twenty-six preceding years I have served in the Congress.

ASSETS

REAL PROPERTY

Single family residence at 609 Ft. Williams Parkway, City of Alexandria, Virginia, at assessed valuation. (Assessed at $1,134,600). Ratio of assessed to market value: 100% (Unencumbered)	$1,280,700
Condominium at N76 W14726 North Point Drive, Village of Menomonee Falls, Waukesha County, Wisconsin, at assessor's estimated market value. (Unencumbered)	$121,600
Undivided 25/44ths interest in single family residence at N52 W32654 Maple Lane, Village of Chenequa, Waukesha County, Wisconsin, at 25/44ths of assessor's estimated market value of $1,229,500.	$698,579.54
TOTAL REAL PROPERTY	$2,100,879.54

2005 disclosure

Common & Preferred Stock	# of shares	$ per share	Value
Abbott Laboratories, Inc.	12200	46.62	568,764.00
Agere Systems Class B	184	1.42	261.28
Allstate Corporation	370	56.04	20,734.80
American Telephone & Telegraph	291.43	18.75	5,464.31
JP Morgan Chase	4539	34.60	157,049.40
Bell South Corp.	1422.3822	26.29	37,394.43
Benton County Mining Company	333	0.00	0.00
BP PLC	3604	62.40	224,889.60
Centerpoint Energy	300	12.03	3,609.00
Chenequa Country Club Realty Co.	1	0.00	0.00
Comcast	423	33.78	14,288.94
Darden Restaurants, Inc.	1440	30.68	44,179.20
Delphi Automotive	212	4.48	949.76
Dunn & Bradstreet, Inc.	2500	61.45	153,625.00
E.I. DuPont de Nemours Corp.	1200	51.24	61,488.00
Eastman Chemical Co.	270	59.00	15,930.00
Eastman Kodak	1080	32.55	35,154.00
El Paso Energy	150	10.58	1,587.00
Exxon Mobil Corp.	9728	59.60	579,788.80
Gartner Group	651	9.57	6,230.07
General Electric Co.	15600	36.06	562,536.00
General Mills, Inc.	2280	49.15	112,062.00
General Motors Corp.	304	29.39	8,934.56
Halliburton Company	2000	43.25	86,500.00
Hospira	1220	32.27	39,369.40
Imation Corp.	99	34.75	3,440.25
IMS Health	5000	24.39	121,950.00
Kellogg Corp.	3200	43.27	138,464.00
Kimberly-Clark Corp.	14738	65.73	968,728.74
Lucent Technologies	696	2.75	1,914.00
Merck & Co., Inc.	34078	32.37	1,103,104.86
3M Company	2000	85.69	171,380.00
Medco Health	4109	49.57	203,683.13
Monsanto Corporation	1426.1575	64.50	91,987.16
Moody's	2500	80.86	202,150.00
Morgan Stanley/Dean Whitter	312	57.25	17,862.00
NCR Corp.	68	33.74	2,294.32
Neenah Paper Co.	462	33.62	15,532.44
Newell Rubbermaid	1676	21.94	36,771.44
One Group Prime Money Market	7123.72	1.00	7,123.72
Pactiv Corp.	200	23.35	4,670.00
PG&E Corp.	175	34.10	5,967.50
Pfizer	22211	26.27	583,482.97
Qwest	571	3.70	2,112.70
Reliant Energy	300	11.38	3,414.00
RH Donnelly Corp.	500	58.09	29,045.00
Sandusky Voting Trust	26	1.00	26.00
SBC Communications	2603.101	23.69	61,667.46

2005 disclosure

Solutia	1672	1.32	2,207.04
Tenneco Automotive	182	12.46	2,267.72
Unisys, Inc.	167	7.06	1,179.02
US Bank Corp.	3081	28.82	88,794.42
Verizon	1251.2993	35.50	44,421.13
Vodaphone Airtouch	370	26.56	9,827.20
Weenergies (Wisconsin Energy)	1022	35.50	36,281.00

TOTAL COMMON & PREFERRED STOCKS AND BONDS $6,702,538.77

2005 disclosure

Life Insurance Policies	Face $	Surrender $
Northwestern Mutual #4378000	12,000.00	65,492.31
Northwestern Mutual #4574061	30,000.00	157,326.55
Massachusetts Mutual #4116575	10,000.00	10,439.69
Massachusetts Mutual #4228344	100,000.00	253,956.40
Old Line Life Ins. #5-1607059L	175,000.00	39,059.43
TOTAL LIFE INSURANCE POLICIES		$526,274.38

2005 disclosure

BANK & SAVINGS & LOAN ACCOUNTS	BALANCE
Bank One, Milwaukee, N.A., checking account	17,934.85
Bank One, Milwaukee, N.A., preferred savings	47,508.18
M&I Lake Country Bank, Hartland, WI, checking account	13,527.58
M&I Lake Country Bank, Hartland, WI, savings	364.47
Burke & Herbert Bank, Alexandria, VA, checking account	1,756.59
JP Morgan, IRA accounts	100,917.14
TOTAL BANK & SAVINGS & LOAN ACCOUNTS	$182,008.81

2005 disclosure

MISCELLANEOUS	VALUE
1994 Cadillac Deville - retail value	$4,925.00
1989 Cadillar Fleetwood - retail value	$2,600.00
1996 Buick Regal - retail value	$5,425.00
1991 Buick Century automobile - retail value	$2,175.00
Office furniture & equipment (estimated)	$1,000.00
Furniture, clothing & personal property (estimated)	$170,000.00
Stamp collection (estimated)	$80,000.00
Interest in Wisconsin retirement fund	$304,740.35
Deposits in Congressional Retirement Fund	$160,254.54
Deposits in Federal Thrift Savings Plan	$209,737.21
Traveller's checks	$7,418.96
17 ft. Boston Whaler boat & 70 hp Johnson outboard motor (estimated)	$7,500.00
20 ft. Pontoon boat & 40 hp Mercury outboard motor	$13,500.00
TOTAL MISCELLANEOUS	$969,276.06
TOTAL ASSETS	$10,480,977.56

LIABILITIES

None

TOTAL LIABILITIES	$0.00
NET WORTH	$10,480,977.56

2005 disclosure

STATEMENT OF 2004 TAXES PAID

Federal income tax	$97,307.00
Wisconsin income tax	$29,049.00
Menomonee Falls, WI property tax	$2,180.00
Chenequa, WI property tax	$21,729.00
Alexandria, VA property tax	$11,289.00

I further declare that I am trustee of a trust established under the will of my later father, Frank James Sensenbrenner, Sr., for the benefit of my sister, Margaret A. Sensenbrenner, and of my two sons, F. James Sensenbrenner, III, and Robert Alan Sensenbrenner. I am further the direct beneficiary of five trusts, but have no control over the assets of either trust. My wife, Cheryl Warren Sensenbrenner, and I are trustees of separate trusts established for the benefit of each son.
Also, I am neither an officer nor a director of any corporation organized under the laws of the State of Wisconsin or of any other state or foreign country.

F. JAMES SENSENBRENNER, JR.,
Member of Congress

Annual Account Statement

NON-EXEMPT TUW F SENSENBRENNER PCTAA
Account number 9500134400
January 1, 2004 - December 31, 2004

BANK ONE TRUST COMPANY, N.A.
111 E WISCONSIN AVE,12TH FLOOR
MILWAUKEE, WI 53202

www.bankone.com

Your Advisor is:
LYNN E PAULL
(414) 977-2027 or (800) 926-4556

Thank you for the opportunity to serve your financial needs. We appreciate your confidence in us.

Please remember to check the Bulletin board (located at the back of your statement) for important messages from Bank One.

Don't hesitate to contact your advisor if you have any questions, comments or concerns.

05030 01957
F JAMES SENSENBRENNER JR
609 FORT WILLIAMS PKWY
ALEXANDRIA VA 22304-1813

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BANK ONE.

Holdings summary

	Value on December 31, 2004	Value on December 31, 2003	Change in value
Cash equivalents	$7,827.95		
Equities	723,595.65		
Fixed income	1,092,716.50		
Other	0.00		
Total holdings	**$1,824,140.10**	$1,776,279.96	$47,860.14
Accruals (income earned but not yet received)	$15,954.85		
Total holdings with accruals	**$1,840,094.95**		

Income summary

Income	Statement period	January 1 to December 31
Dividends (domestic/foreign/mutual fund income)	$11,462.04	$11,462.04
Interest (taxable/non-taxable)	43,032.82	43,032.82
Other income	0.00	0.00
Total income	**$54,494.86**	$54,494.86
Realized gain/(loss)		
	$46,915.68	$46,915.68

The income summary includes taxable and tax-exempt income for both principal and income beneficiaries, please refer to the Transaction detail for an income breakdown. These amounts represent approximate income and gain/(loss) amounts and should not be used for final Internal Revenue Service reporting.

Market reconciliation

	Statement period	January 1 to December 31
Beginning market value	$1,776,279.96	$1,776,279.96
Receipts	373.54	373.54
Disbursements	(88,058.94)	(88,058.94)
Income	54,494.86	54,494.86
Capital gains distributions	4,519.56	4,519.56
Change in asset market value	76,531.12	76,531.12
Ending market value	$1,824,140.10	$1,824,140.10

The Market reconciliation provides a summary of all activity in the account. The Receipts and Disbursements categories may include Non-Cash Transactions such as transfers within the account, name change transactions, asset receipts and distributions, and stock split transactions. The Transaction detail section provides an itemized list of all transactions. The Transaction summary provides a summary of cash receipt and disbursement transactions.

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Transaction summary

	Income	Principal
Beginning cash balance 1/1/04	$239.47	$(239.47)
Cash receipts		
Dividends (domestic/foreign/mutual fund income)	$11,462.04	$0.00
Interest (taxable/non-taxable)	43,032.82	0.00
Other cash receipts	0.00	4,893.10
Total cash receipts	$54,494.86	$4,893.10
Cash disbursements		
Cash disbursements	$(57,669.34)	$(21,382.07)
Administrative expenses	(5,033.76)	(3,973.77)
Total cash disbursements	$(62,703.10)	$(25,355.84)
Investment transactions		
Purchases	$0.00	$(528,111.85)
Sales and maturities	0.00	556,782.83
Total investment transactions	$0.00	$28,670.98
Ending cash balance 12/31/04	$(7,968.77)	$7,968.77

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Only the Asset allocation analysis includes mutual fund holdings. The Bond quality and maturity analyses (if applicable) are displayed excluding mutual funds.

Investment objective: Tax-Free Conservative Growth

This strategy seeks to provide a high level of tax-exempt current income and the opportunity to earn capital appreciation by investing between 60% and 80% of its assets in tax-exempt fixed income securities and between 20% and 40% in equity securities. Principal volatility is expected to be low.

Asset allocation

- 0.4% - Cash equivalents
- 39.7% - Equities
  - 19.9% - *Consumer non-durable*
  - 19.5% - *Mutual funds*
  - 0.3% - *Industrial commodities*
- 59.9% - Fixed income
  - 59.9% - *Municipal obligations*

The Asset allocation may not be exactly as described in the Investment objective due to Other Asset holdings.

Bond maturity

Less than 1	1 - 5	5 - 10	10 or more	*Years*
$101,818.00	$473,295.00	$517,603.50	$0.00	*Market value*
9%	43%	48%	0%	*% of bond holdings*

The Years indicate the number of years until the bond is scheduled to mature based on the statement end date. Some bonds may be called, or paid in full, before their stated maturity.

Bond quality

Rating	*% of bond holdings*	*Market value*
AAA	95%	$1,038,654.50
AA	0%	0.00
A	5%	54,062.00
BBB	0%	0.00
BB	0%	0.00
B	0%	0.00
Other	0%	0.00
Not rated	0%	0.00

We use Standard & Poor's and Moody's rating services as a guide to determine the credit risk associated with a bond. Please be advised that the Bond quality table provides general information regarding the ratings of your bond holdings. If you have additional questions regarding your Bond ratings, please contact your Advisor.

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BANK ONE.

Holdings detail

Cash equivalents

Very liquid assets Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
ONE GROUP PRIME MONEY MARKET FUND	7,827.950	1.000	$7,827.95	$7,827.95	$0.00	1.73%	$135.42
INCOME CASH	(7,968.770)	1.000	(7,968.77)	(7,968.77)	0.00	0.00%	0.00
PRINCIPAL CASH	7,968.770	1.000	7,968.77	7,968.77	0.00	0.00%	0.00
Total cash equivalents			**$7,827.95**	**$7,827.95**	**$0.00**		**$135.42**

Equities

Consumer non-durable Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
KIMBERLY CLARK CORP	5,500.000	65.810	$361,955.00	$74,706.02	$287,248.98	2.43%	$8,800.00
Industrial commodities							
NEENAH PAPER INC	166.000	32.600	5,411.60	1,211.79	4,199.81	0.00%	0.00
Mutual funds							
ONE GROUP INTERNATIONAL EQTY INDX FD	2,939.895	20.030	58,886.10	50,000.00	8,886.10	0.93%	549.76
ONE GROUP MARKET EXPANSION INDEX FD	25,501.111	11.660	297,342.95	230,250.00	67,092.95	0.45%	1,326.06
Total mutual funds			$356,229.05	$280,250.00	$75,979.05		$1,875.82
Total equities			**$723,595.65**	**$356,167.81**	**$367,427.84**		**$10,675.82**

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Holdings detail continued

Fixed income

Municipal obligations

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Yield to maturity	Estimated annual income
LOS ANGELES CALIF PKG REV SER A DTD 04/15/1999 5.00% DUE 05/01/2005 QUALITY TABLE RATING: AAA	50,000.000	101.016	$50,508.00	$50,122.55	$385.45	4.95%	4.950%	$2,500.00
ARCATA CALIF JT PWRS FING AUTH WASTEWATER REV DTD 01/01/1997 4.85% DUE 12/01/2005 QUALITY TABLE RATING: AAA	50,000.000	102.620	51,310.00	50,000.00	1,310.00	4.73%	1.950%	2,425.00
LOS ANGELES CNTY CALIF MET TRANSN AUTH SALES TAX REV DTD 05/01/1999 4.25% DUE 07/01/2006 QUALITY TABLE RATING: AAA	50,000.000	103.233	51,616.50	51,918.41	(301.91)	4.12%	2.050%	2,125.00
CULVER CITY CALIF REDEV FIN AUTH REV REF-TAX ALLOC-SER A DTD 10/13/1999 4.40% DUE 11/01/2006 QUALITY TABLE RATING: AAA	50,000.000	104.094	52,047.00	50,000.00	2,047.00	4.23%	2.110%	2,200.00
SAN DIEGO CNTY CALIF REGL TRANSN COMMN SALES TAX REV REF-SECOND SR- SER A DTD 03/01/1993 5.25% DUE 04/01/2007 QUALITY TABLE RATING: AAA	50,000.000	106.930	53,465.00	50,000.00	3,465.00	4.91%	2.080%	2,625.00

Holdings detail continued

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Yield to maturity	Estimated annual income
HEMET CALIF WTR REV REF DTD 06/01/1997 5.00% DUE 08/01/2007 QUALITY TABLE RATING: AAA	50,000.000	107.104	$53,552.00	$50,000.00	$3,552.00	4.67%	2.157%	$2,500.00
CABRILLO CALIF CMNTY COLLEGE DIST SER A DTD 10/01/1998 4.10% DUE 08/01/2008 QUALITY TABLE RATING: AAA	50,000.000	106.191	53,095.50	49,797.50	3,298.00	3.86%	2.290%	2,050.00
JURUPA CALIF CMNTY SVCS DIST SPL TAX CMNTY FACS DIST NO 1 DTD 12/30/1998 4.10% DUE 09/01/2008 QUALITY TABLE RATING: AAA	50,000.000	106.111	53,055.50	49,800.00	3,255.50	3.86%	2.350%	2,050.00
CALIFORNIA ST DEPT TRANSN REV FED HWY GRANT ANTIC BDS SER A DTD 02/01/2004 2.50% DUE 02/01/2009 QUALITY TABLE RATING: AAA	50,000.000	99.972	49,986.00	50,777.88	(791.88)	2.50%	2.507%	1,250.00
JEFFERSON CALIF UN HIGH SCH DIST SAN MATEO CNTY SER D DTD 05/15/1999 4.30% DUE 08/01/2009 QUALITY TABLE RATING: AAA	50,000.000	105.495	52,747.50	50,000.00	2,747.50	4.08%	3.007%	2,150.00

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Holdings detail continued

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Yield to maturity	Estimated annual income
IRVINE CALIF UNI SCH DIST SPL TAX CMNTY FACS DIST NO 86-1 DTD 05/26/1999 4.25% DUE 11/01/2009 QUALITY TABLE RATING: AAA	50,000.000	107.460	$53,730.00	$49,790.00	$3,940.00	3.95%	2.597%	$2,125.00
SAN MATEO CNTY CALIF TRAN DIST SER A DTD 12/09/1998 4.25% DUE 06/01/2010 QUALITY TABLE RATING: AAA	50,000.000	105.567	52,783.50	47,775.00	5,008.50	4.03%	3.124%	2,125.00
RANCHO MIRAGE CALIF JT PWRS FING AUTH CTFS PARTN REF EISENHOWER MED CTR SER A DTD 01/01/1997 5.25% DUE 07/01/2010 QUALITY TABLE RATING: AAA	50,000.000	108.555	54,277.50	50,800.32	3,477.18	4.84%	3.525%	2,625.00
EL PASO DE ROBLES CALIF SER C DTD 05/01/2002 4.25% DUE 08/01/2010 QUALITY TABLE RATING: AAA	50,000.000	107.284	53,642.00	52,926.08	715.92	3.96%	2.830%	2,125.00
PASADENA CALIF UNI SCH DIST ELEC 1997 SER D DTD 05/23/2003 3.25% DUE 05/01/2011 QUALITY TABLE RATING: AAA	50,000.000	101.412	50,706.00	50,426.89	279.11	3.20%	3.003%	1,625.00

Holdings detail continued

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Yield to maturity	Estimated annual income
SAN FRANCISCO CALIF CITY & CNTY REF SER 1 DTD 10/15/1997 5.00% DUE 06/15/2011 QUALITY TABLE RATING: AAA	50,000.000	107.924	$53,962.00	$50,000.00	$3,962.00	4.63%	3.613%	$2,500.00
LOS ANGELES CALIF CMNTY COLLEGE DIST SER A DTD 06/20/2001 4.125% DUE 08/01/2011 QUALITY TABLE RATING: AAA	50,000.000	106.501	53,250.50	52,664.94	585.56	3.87%	3.028%	2,062.50
TEMPLE CITY CALIF UNI SCH DIST SER A DTD 08/12/1998 CAP APPREC DUE 08/01/2012 * QUALITY TABLE RATING: AAA	50,000.000	74.759	37,379.50	34,743.95	2,635.55		0.000%	
CALIFORNIA ST DTD 10/01/2000 5.00% DUE 10/01/2012 QUALITY TABLE RATING: A	50,000.000	108.124	54,062.00	50,780.27	3,281.73	4.62%	3.780%	2,500.00
LOMA LINDA CALIF HOSP REV REF LOMA LINDA UNIV MED CTR A DTD 09/01/1999 5.05% DUE 12/01/2012 QUALITY TABLE RATING: AAA	50,000.000	111.387	55,693.50	51,815.00	3,878.50	4.53%	3.397%	2,525.00

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Holdings detail continued

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Yield to maturity	Estimated annual income
MANTECA CALIF UNI SCH DIST SPL TAX CMNTY FACS DIST NO 89-2 SER C DTD 11/01/2001 4.00% DUE 09/01/2013 QUALITY TABLE RATING: AAA	50,000.000	103.694	$51,847.00	$52,008.22	$(161.22)	3.86%	3.502%	$2,000.00
Total fixed income			$1,092,716.50	$1,046,147.01	$46,569.49			$44,087.50
Total holdings			$1,824,140.10	$1,410,142.77	$413,997.33			$54,898.74
Accruals (income earned but not yet received)			$15,954.85					
Total holdings with accruals			$1,840,094.95					

Assets identified with an asterisk (*) at the beginning of the asset name are held in the Invested Income Portfolio.

Transaction detail

			Income	Principal
Beginning cash balance 1/1/04			$239.47	$(239.47)
Cash receipts				
Domestic dividends				
Date	*Description*	*Realized gain/(loss)*	*Income*	*Principal*
1/5/04	CASH RECEIPT OF DIVIDEND EARNED ON KIMBERLY CLARK CORP $0.34/SHARE ON 7,485 SHARES DUE 1/5/04		$2,544.90	
4/2/04	CASH RECEIPT OF DIVIDEND EARNED ON KIMBERLY CLARK CORP $0.40/SHARE ON 6,360 SHARES DUE 4/2/04		2,544.00	
7/2/04	CASH RECEIPT OF DIVIDEND EARNED ON KIMBERLY CLARK CORP $0.40/SHARE ON 6,000 SHARES DUE 7/2/04		2,400.00	
10/4/04	CASH RECEIPT OF DIVIDEND EARNED ON KIMBERLY CLARK CORP $0.40/SHARE ON 5,500 SHARES DUE 10/4/04		2,200.00	
Total domestic dividends			$9,688.90	$0.00
Mutual fund income				
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MARKET EXPANSION INDEX FD $0.012978/SHARE ON 25,016.145 SHARES DUE 1/2/04		324.61	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP ULTRA SHORT-TERM BOND FUND DIVIDEND FROM 12/1/03 TO 12/31/03		$35.60	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP ULTRA SHORT-TERM BOND FUND DIVIDEND FROM 1/1/04 TO 1/31/04		33.98	
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP ULTRA SHORT-TERM BOND FUND DIVIDEND FROM 2/1/04 TO 2/29/04		33.98	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MARKET EXPANSION INDEX FD $0.011002/SHARE ON 25,016.145 SHARES DUE 4/1/04		275.23	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP ULTRA SHORT-TERM BOND FUND DIVIDEND FROM 3/1/04 TO 3/31/04		128.67	
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP ULTRA SHORT-TERM BOND FUND DIVIDEND FROM 4/1/04 TO 4/30/04		44.17	
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP ULTRA SHORT-TERM BOND FUND DIVIDEND FROM 5/1/04 TO 5/31/04		21.84	

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MARKET EXPANSION INDEX FD $0.014709/SHARE ON 25,501.111 SHARES DUE 7/1/04		$375.10	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP ULTRA SHORT-TERM BOND FUND DIVIDEND FROM 6/1/04 TO 6/30/04		22.93	
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP ULTRA SHORT-TERM BOND FUND DIVIDEND FROM 7/1/04 TO 7/31/04		22.93	
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP ULTRA SHORT-TERM BOND FUND DIVIDEND FROM 8/1/04 TO 8/31/04		25.12	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MARKET EXPANSION INDEX FD $0.013653/SHARE ON 25,501.111 SHARES DUE 10/1/04		348.17	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP ULTRA SHORT-TERM BOND FUND DIVIDEND FROM 9/1/04 TO 9/30/04		26.21	
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP ULTRA SHORT-TERM BOND FUND DIVIDEND FROM 10/1/04 TO 10/31/04		27.30	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP ULTRA SHORT-TERM BOND FUND DIVIDEND FROM 11/1/04 TO 11/30/04		$27.30	
Total mutual fund income			$1,773.14	$0.00
Taxable interest				
1/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 12/1/03 TO 12/31/03		82.89	
2/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 1/1/04 TO 1/31/04		73.69	
3/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 2/1/04 TO 2/29/04		82.32	
4/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 3/1/04 TO 3/31/04		61.24	
5/3/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 4/1/04 TO 4/30/04		7.60	
6/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 5/1/04 TO 5/31/04		7.24	

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
7/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 6/1/04 TO 6/30/04		$13.55	
8/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 7/1/04 TO 7/31/04		10.24	
9/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 8/1/04 TO 8/31/04		16.56	
10/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 9/1/04 TO 9/30/04		15.97	
11/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 10/1/04 TO 10/31/04		37.16	
12/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 11/1/04 TO 11/30/04		9.77	
Total taxable interest			$418.23	$0.00
Non-taxable interest				
1/2/04	CASH RECEIPT OF INTEREST EARNED ON LOS ANGELES CNTY CAL 4.250% 7/01/06 $0.02125/$1 PV ON 50,000 PAR VALUE DUE 1/1/04		1,062.50	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
1/2/04	CASH RECEIPT OF INTEREST EARNED ON RANCHO MIRAGE CALIF 5.250% 7/01/10 $0.02625/$1 PV ON 50,000 PAR VALUE DUE 1/1/04		$1,312.50	
2/2/04	CASH RECEIPT OF INTEREST EARNED ON CABRILLO CALIF CMNTY 4.100% 8/01/08 $0.0205/$1 PV ON 50,000 PAR VALUE DUE 2/1/04		1,025.00	
2/2/04	CASH RECEIPT OF INTEREST EARNED ON HEMET CALIF WTR REV 5.000% 8/01/07 $0.025/$1 PV ON 50,000 PAR VALUE DUE 2/1/04		1,250.00	
2/2/04	CASH RECEIPT OF INTEREST EARNED ON JEFFERSON CALIF 4.300% 8/01/09 $0.0215/$1 PV ON 50,000 PAR VALUE DUE 2/1/04		1,075.00	
2/2/04	CASH RECEIPT OF INTEREST EARNED ON LOS ANGELES CALIF CM 4.125% 8/01/11 $0.020625/$1 PV ON 50,000 PAR VALUE DUE 2/1/04		1,031.25	
2/2/04	CASH RECEIPT OF INTEREST EARNED ON LOS ANGELES CALIF MU 4.700% 2/01/04 $0.0235/$1 PV ON 50,000 PAR VALUE DUE 2/1/04		1,175.00	
2/17/04	PAID ACCRUED INTEREST ON PURCHASE OF MANTECA CALIF UNI SC 4.000% 9/01/13		(922.22)	
3/1/04	CASH RECEIPT OF INTEREST EARNED ON JURUPA CALIF CMNTY 4.100% 9/01/08 $0.0205/$1 PV ON 50,000 PAR VALUE DUE 3/1/04		1,025.00	

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
3/1/04	CASH RECEIPT OF INTEREST EARNED ON MANTECA CALIF UNI SC 4.000% 9/01/13 $0.02/$1 PV ON 50,000 PAR VALUE DUE 3/1/04		$1,000.00	
3/26/04	PAID ACCRUED INTEREST ON PURCHASE OF CALIFORNIA ST DEPT 2.500% 2/01/09		(190.97)	
4/1/04	CASH RECEIPT OF INTEREST EARNED ON CALIFORNIA ST 5.000% 10/01/12 $0.025/$1 PV ON 50,000 PAR VALUE DUE 4/1/04		1,250.00	
4/1/04	CASH RECEIPT OF INTEREST EARNED ON LONG BEACH CALIF BD 4.300% 10/01/04 $0.0215/$1 PV ON 50,000 PAR VALUE DUE 4/1/04		1,075.00	
4/1/04	CASH RECEIPT OF INTEREST EARNED ON SAN DIEGO CNTY CALIF 5.250% 4/01/07 $0.02625/$1 PV ON 50,000 PAR VALUE DUE 4/1/04		1,312.50	
4/14/04	PAID ACCRUED INTEREST ON PURCHASE OF EL PASO DE ROBLES CA 4.250% 8/01/10		(430.90)	
5/3/04	CASH RECEIPT OF INTEREST EARNED ON CULVER CITY CALIF RE 4.400% 11/01/06 $0.022/$1 PV ON 50,000 PAR VALUE DUE 5/1/04		1,100.00	
5/3/04	CASH RECEIPT OF INTEREST EARNED ON IRVINE CALIF 4.250% 11/01/09 $0.02125/$1 PV ON 50,000 PAR VALUE DUE 5/1/04		1,062.50	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
5/3/04	CASH RECEIPT OF INTEREST EARNED ON LOS ANGELES CALIF PK 5.000% 5/01/05 $0.025/$1 PV ON 50,000 PAR VALUE DUE 5/1/04		$1,250.00	
6/1/04	CASH RECEIPT OF INTEREST EARNED ON ARCATA CALIF JT PWRS 4.850% 12/01/05 $0.02425/$1 PV ON 50,000 PAR VALUE DUE 6/1/04		1,212.50	
6/1/04	CASH RECEIPT OF INTEREST EARNED ON LOMA LINDA CALIF HOS 5.050% 12/01/12 $0.02525/$1 PV ON 50,000 PAR VALUE DUE 6/1/04		1,262.50	
5/1/04	CASH RECEIPT OF INTEREST EARNED ON SAN MATEO CNTY CALIF 4.250% 6/01/10 $0.02125/$1 PV ON 50,000 PAR VALUE DUE 6/1/04		1,062.50	
6/15/04	CASH RECEIPT OF INTEREST EARNED ON SAN FRANCISCO CALIF 5.000% 6/15/11 $0.025/$1 PV ON 50,000 PAR VALUE DUE 6/15/04		1,250.00	
7/1/04	CASH RECEIPT OF INTEREST EARNED ON LOS ANGELES CNTY CAL 4.250% 7/01/06 $0.02125/$1 PV ON 50,000 PAR VALUE DUE 7/1/04		1,062.50	
7/1/04	CASH RECEIPT OF INTEREST EARNED ON RANCHO MIRAGE CALIF 5.250% 7/01/10 $0.02625/$1 PV ON 50,000 PAR VALUE DUE 7/1/04		1,312.50	

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
8/2/04	CASH RECEIPT OF INTEREST EARNED ON CABRILLO CALIF CMNTY 4.100% 8/01/08 $0.0205/$1 PV ON 50,000 PAR VALUE DUE 8/1/04		$1,025.00	
8/2/04	CASH RECEIPT OF INTEREST EARNED ON CALIFORNIA ST DEPT 2.500% 2/01/09 $0.0125/$1 PV ON 50,000 PAR VALUE DUE 8/1/04		625.00	
8/2/04	CASH RECEIPT OF INTEREST EARNED ON EL PASO DE ROBLES CA 4.250% 8/01/10 $0.02125/$1 PV ON 50,000 PAR VALUE DUE 8/1/04		1,062.50	
8/2/04	CASH RECEIPT OF INTEREST EARNED ON HEMET CALIF WTR REV 5.000% 8/01/07 $0.025/$1 PV ON 50,000 PAR VALUE DUE 8/1/04		1,250.00	
8/2/04	CASH RECEIPT OF INTEREST EARNED ON JEFFERSON CALIF 4.300% 8/01/09 $0.0215/$1 PV ON 50,000 PAR VALUE DUE 8/1/04		1,075.00	
8/2/04	CASH RECEIPT OF INTEREST EARNED ON LOS ANGELES CALIF CM 4.125% 8/01/11 $0.020625/$1 PV ON 50,000 PAR VALUE DUE 8/1/04		1,031.25	
9/1/04	CASH RECEIPT OF INTEREST EARNED ON JURUPA CALIF CMNTY 4.100% 9/01/08 $0.0205/$1 PV ON 50,000 PAR VALUE DUE 9/1/04		1,025.00	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
9/1/04	CASH RECEIPT OF INTEREST EARNED ON MANTECA CALIF UNI SC 4.000% 9/01/13 $0.02/$1 PV ON 50,000 PAR VALUE DUE 9/1/04		$1,000.00	
10/1/04	CASH RECEIPT OF INTEREST EARNED ON CALIFORNIA ST 5.000% 10/01/12 $0.025/$1 PV ON 50,000 PAR VALUE DUE 10/1/04		1,250.00	
10/1/04	CASH RECEIPT OF INTEREST EARNED ON LONG BEACH CALIF BD 4.300% 10/01/04 $0.0215/$1 PV ON 50,000 PAR VALUE DUE 10/1/04		1,075.00	
10/1/04	CASH RECEIPT OF INTEREST EARNED ON SAN DIEGO CNTY CALIF 5.250% 4/01/07 $0.02625/$1 PV ON 50,000 PAR VALUE DUE 10/1/04		1,312.50	
10/18/04	PAID ACCRUED INTEREST ON PURCHASE OF PASADENA CALIF UNI 3.250% 5/01/11		(753.82)	
11/1/04	CASH RECEIPT OF INTEREST EARNED ON CULVER CITY CALIF RE 4.400% 11/01/08 $0.022/$1 PV ON 50,000 PAR VALUE DUE 11/1/04		1,100.00	
11/1/04	CASH RECEIPT OF INTEREST EARNED ON IRVINE CALIF 4.250% 11/01/09 $0.02125/$1 PV ON 50,000 PAR VALUE DUE 11/1/04		1,062.50	
11/1/04	CASH RECEIPT OF INTEREST EARNED ON LOS ANGELES CALIF PK 5.000% 5/01/05 $0.025/$1 PV ON 50,000 PAR VALUE DUE 11/1/04		1,250.00	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
11/1/04	CASH RECEIPT OF INTEREST EARNED ON PASADENA CALIF UNI 3.250% 5/01/11 $0.01625/$1 PV ON 50,000 PAR VALUE DUE 11/1/04		$812.50	
12/1/04	CASH RECEIPT OF INTEREST EARNED ON ARCATA CALIF JT PWRS 4.850% 12/01/05 $0.02425/$1 PV ON 50,000 PAR VALUE DUE 12/1/04		1,212.50	
12/1/04	CASH RECEIPT OF INTEREST EARNED ON LOMA LINDA CALIF HOS 5.050% 12/01/12 $0.02525/$1 PV ON 50,000 PAR VALUE DUE 12/1/04		1,262.50	
12/1/04	CASH RECEIPT OF INTEREST EARNED ON SAN MATEO CNTY CALIF 4.250% 6/01/10 $0.02125/$1 PV ON 50,000 PAR VALUE DUE 12/1/04		1,062.50	
12/15/04	CASH RECEIPT OF INTEREST EARNED ON SAN FRANCISCO CALIF 5.000% 6/15/11 $0.025/$1 PV ON 50,000 PAR VALUE DUE 12/15/04		1,250.00	
Total non-taxable interest			$42,614.59	$0.00
Other cash receipts				
1/14/04	CASH RECEIPT TRANSFER FROM INCOME			$239.47

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
11/18/04	CASH RECEIPT CLASS ACTION SETTLEMENT CLASS ACTION PROCEEDS FROM NATIONSBANK SECURITIES LITIGATION PROCEEDS RCVD FROM CLOSED ACCOUNT-9572007410			$134.07
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP MARKET EXPANSION INDEX FD $0.1654/SHARE ON 25,501.111 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $4,218.14 ON FEDERAL COST LT CAPITAL GAIN OF $4,218.14 ON STATE COST	$4,218.14		4,218.14
12/17/04	RECEIVE ST CAPITAL GAINS DISTRIBUTION ON ONE GROUP MARKET EXPANSION INDEX FD $0.0118/SHARE ON 25,501.111 SHARES DUE 12/16/04 ST CAPITAL GAIN OF $301.42 ON FEDERAL COST ST CAPITAL GAIN OF $301.42 ON STATE COST	301.42		301.42
Total other cash receipts			$0.00	$4,893.10
Total cash receipts			**$54,494.86**	**$4,893.10**

Cash disbursements

Other cash disbursements

Date	Description	Income	Principal
1/14/04	CASH DISBURSEMENT TRANSFER TO PRINCIPAL	$(239.47)	

Transaction detail continued

Date	Description	Income	Principal
3/31/04	CASH DISBURSEMENT PAID TO ACCOUNT # 9572070510 TO ANOTHER ACCOUNT PAID FOR MARGARET ANITA SENSENBRENNER TRANSFER FROM 9500134400 TO 9572070510	$(13,368.31)	
4/5/04	CASH DISBURSEMENT PAID TO U S TREASURY FIDUCIARY FEDERAL INCOME TAX ***WITX TAX DUE ON FORM 1041 FOR CALENDAR YR RETUR		$(7,106.00)
4/5/04	CASH DISBURSEMENT PAID TO WISCONSIN DEPT OF REVENUE FIDUCIARY STATE INCOME TAX ***WITX TAX DUE ON STATE FIDUCIARY CALENDAR YR RTN		(1,066.00)
6/10/04	CASH DISBURSEMENT PAID TO U S TREASURY FIDUCIARY EST FED INCOME TAX ***WITX FEDERAL ESTIMATED TAX		(3,269.00)
6/10/04	CASH DISBURSEMENT PAID TO WISCONSIN DEPT OF REVENUE FIDUCIARY EST STATE TAX ***WITX INSTALLMENT ON STATE FIDUCIARY INCOME TAX		(490.00)

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Transaction detail continued

Date	Description	Income	Principal
6/30/04	CASH DISBURSEMENT PAID TO ACCOUNT # 9572070510 TO ANOTHER ACCOUNT PAID FOR MARGARET ANITA SENSENBRENNER TRANSFER FROM 9500134400 TO 9572070510	$(13,368.31)	
9/9/04	CASH DISBURSEMENT PAID TO U S TREASURY FIDUCIARY EST FED INCOME TAX ***WITX FEDERAL ESTIMATED TAX		$(3,914.00)
9/9/04	CASH DISBURSEMENT PAID TO WISCONSIN DEPT OF REVENUE FIDUCIARY EST STATE TAX ***WITX INSTALLMENT ON STATE FIDUCIARY INCOME TAX		(642.00)
9/30/04	CASH DISBURSEMENT PAID TO ACCOUNT # 9572070510 TO ANOTHER ACCOUNT PAID FOR MARGARET ANITA SENSENBRENNER TRANSFER FROM 9500134400 TO 9572070510	(13,368.31)	
11/22/04	CASH DISBURSEMENT PAID TO BANK ONE SVG4941588070 ACH TRANSFER TO SAVINGS ACCT PAID FOR F JAMES SENSENBRENNER JR 075000019-4941588070		(3,956.64)

Transaction detail continued

Date	Description	Income	Principal
11/22/04	CASH DISBURSEMENT PAID TO BANK ONE SVG4941588070 ACH TRANSFER TO SAVINGS ACCT PAID FOR F JAMES SENSENBRENNER JR 075000019-4941588070	$(3,956.63)	
12/30/04	CASH DISBURSEMENT PAID TO FOLEY & LARDNER LLP LEGAL FEE FOR SVCS RENDERED A/C #018423-0101 INV #25109152 F. JAMES SENSENBRENNER JR. CK #384334		$(938.43)
12/31/04	CASH DISBURSEMENT PAID TO ACCOUNT # 9572070510 TO ANOTHER ACCOUNT PAID FOR MARGARET ANITA SENSENBRENNER TRANSFER FROM 9500134400 TO 9572070510	(13,388.31)	
Total other cash disbursements		$(57,669.34)	$(21,382.07)
Administrative expenses			
1/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH DECEMBER MONTH END	(317.77)	(317.77)
2/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JANUARY MONTH END	(320.92)	(320.92)
3/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH FEBRUARY MONTH END	(320.82)	(320.82)
4/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH MARCH MONTH END	(330.96)	(330.96)

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Transaction detail continued

Date	Description	Income	Principal
5/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH APRIL MONTH END	$(322.02)	$(322.02)
6/14/04	ADMINISTRATIVE FEES COLLECTED THROUGH MAY MONTH END	(322.95)	(322.95)
7/7/04	FIDUCIARY TAX RETURN PREP COLLECTED 2003 FORMS 1041/2	(1,060.00)	
7/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JUNE MONTH END	(336.68)	(336.68)
8/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JULY MONTH END	(335.95)	(335.95)
9/13/04	ADMINISTRATIVE FEES COLLECTED THROUGH AUGUST MONTH END	(338.00)	(338.00)
10/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH SEPTEMBER MONTH END	(338.01)	(338.01)
11/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH OCTOBER MONTH END	(344.60)	(344.61)
12/13/04	ADMINISTRATIVE FEES COLLECTED THROUGH NOVEMBER MONTH END	(345.08)	(345.08)
Total administrative expenses		$(5,033.76)	$(3,973.77)
Total cash disbursements		**$(62,703.10)**	**$(25,355.84)**

4558

Transaction detail continued

Investment transactions

Purchases

Date	Description	Realized gain/(loss)	Income	Principal
	COMBINED PURCHASES FOR THE PERIOD 1/ 1/04 - 12/31/04 OF ONE GROUP PRIME MONEY MARKET FUND INVESTMENTS AT TAX COST: $221,284.85			$(221,284.85)
2/17/04	PURCHASED 50,000 PAR VALUE OF MANTECA CALIF UNI SC 4.000% 9/01/13 TRADE DATE 2/11/04 PURCHASED THROUGH WACHOVIA SECURITIES, LLC 50,000 PAR VALUE AT 104.413 % INVESTMENTS AT TAX COST: $52,206.50			(52,206.50)
3/23/04	PURCHASED 1,488.095 SHARES OF ONE GROUP INTERNATIONAL EQTY INDX FD TRADE DATE 3/22/04 1,488.095 SHARES AT $16.80 INVESTMENTS AT TAX COST: $25,000.00			(25,000.00)
3/25/04	PURCHASED 4,509.018 SHARES OF ONE GROUP ULTRA SHORT-TERM BOND FUND TRADE DATE 3/24/04 4,509.018 SHARES AT $9.98 INVESTMENTS AT TAX COST: $45,000.00			(45,000.00)

4559

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
3/26/04	PURCHASED 50,000 PAR VALUE OF CALIFORNIA ST DEPT 2.500% 2/01/09 TRADE DATE 3/23/04 PURCHASED THROUGH U.S. BANCORP PIPER JAFFRAY 50,000 PAR VALUE AT 101.832 % INVESTMENTS AT TAX COST: $50,916.00			$(50,916.00)
4/14/04	PURCHASED 50,000 PAR VALUE OF EL PASO DE ROBLES CA 4.250% 8/01/10 TRADE DATE 4/8/04 PURCHASED THROUGH WACHOVIA SECURITIES, LLC 50,000 PAR VALUE AT 106.529 % INVESTMENTS AT TAX COST: $53,264.50			(53,264.50)
6/15/04	PURCHASED 484.966 SHARES OF ONE GROUP MARKET EXPANSION INDEX FD TRADE DATE 6/14/04 484.966 SHARES AT $10.31 INVESTMENTS AT TAX COST: $5,000.00			(5,000.00)
6/18/04	PURCHASED 1,451.8 SHARES OF ONE GROUP INTERNATIONAL EQTY INDX FD TRADE DATE 6/17/04 1,451.8 SHARES AT $17.22 INVESTMENTS AT TAX COST: $25,000.00			(25,000.00)

4560

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
10/18/04	PURCHASED 50,000 PAR VALUE OF PASADENA CALIF UNI 3.250% 5/01/11 TRADE DATE 10/13/04 PURCHASED THROUGH DAIN RAUCHER INCORPORATED 50,000 PAR VALUE AT 100.88 % INVESTMENTS AT TAX COST: $50,440.00			$(50,440.00)
Total purchases			$0.00	$(528,111.85)
Sales and maturities				
	COMBINED SALES FOR THE PERIOD 1/ 1/04 - 12/31/04 OF ONE GROUP PRIME MONEY MARKET FUND INVESTMENTS AT TAX COST: $-341,550.80			341,550.80
2/2/04	MATURED 50,000 PAR VALUE OF LOS ANGELES CALIF MU 4.700% 2/01/04 TRADE DATE 2/1/04 50,000 PAR VALUE AT 100 % INVESTMENTS AT TAX COST: $-50,000.00			50,000.00
3/25/04	SOLD 360 SHARES OF KIMBERLY CLARK CORP TRADE DATE 3/22/04 SOLD THROUGH CORRESPONDENT SERVICES CORP. PAID $10.80 BROKERAGE PAID $0.86 SEC FEE 360 SHARES AT $60.58 INVESTMENTS AT TAX COST: $-4,969.48	$16,827.66		21,797.14

4561

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
4/16/04	SOLD 4,024.145 SHARES OF ONE GROUP ULTRA SHORT-TERM BOND FUND TRADE DATE 4/15/04 4,024.145 SHARES AT $9.94 INVESTMENTS AT TAX COST: $-40,160.97	$(160.97)		$40,000.00
5/25/04	SOLD 1,011.122 SHARES OF ONE GROUP ULTRA SHORT-TERM BOND FUND TRADE DATE 5/24/04 1,011.122 SHARES AT $9.89 INVESTMENTS AT TAX COST: $-10,080.47	(80.47)		10,000.00
6/17/04	SOLD 500 SHARES OF KIMBERLY CLARK CORP TRADE DATE 6/14/04 SOLD THROUGH SPEAR, LEEDS & KELLOGG PAID $15.00 BROKERAGE PAID $0.77 SEC FEE 500 SHARES AT $65.26 INVESTMENTS AT TAX COST: $-6,902.06	25,712.17		32,614.23
10/1/04	MATURED 50,000 PAR VALUE OF LONG BEACH CALIF BD 4.300% 10/01/04 TRADE DATE 10/1/04 50,000 PAR VALUE AT 100 % INVESTMENTS AT TAX COST: $-49,859.50	140.50		50,000.00

4562

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
12/17/04	SOLD 0.6667 SHARES OF NEENAH PAPER INC TRADE DATE 12/17/04 SOLD THROUGH CASH IN LIEU OF FRACTIONAL SH CASH IN LIEU OF FRACTIONAL SHARE INVESTMENTS AT TAX COST: $-4.87	$15.56		$20.43
12/27/04	SOLD 1,092.035 SHARES OF ONE GROUP ULTRA SHORT-TERM BOND FUND TRADE DATE 12/23/04 1,092.035 SHARES AT $9.89 INVESTMENTS AT TAX COST: $-10,858.56	(58.33)		10,800.23
Total sales and maturities			$0.00	$556,782.83
Total investment transactions			**$0.00**	**$28,670.98**

Other investment transactions (non-cash)

Date	Description	Income	Principal
2/2/04	AMORTIZED PREMIUM ON LOS ANGELES CALIF CM 4.125% 8/01/11 FED BASIS DECREASED BY $27.91 TO $52,994.14 STATE BASIS DECREASED BY $27.91 TO $52,994.14 2/1/04 CURRENT YEAR AMORTIZATION INVESTMENTS AT TAX COST: $-27.91		

4563

Transaction detail continued

Date	Description	Income	Principal
3/1/04	AMORTIZED PREMIUM ON MANTECA CALIF UNI SC 4.000% 9/01/13 FED BASIS DECREASED BY $7.97 TO $52,198.53 STATE BASIS DECREASED BY $7.97 TO $52,198.53 3/1/04 CURRENT YEAR AMORTIZATION INVESTMENTS AT TAX COST: $-7.97		
4/1/04	AMORTIZED PREMIUM ON CALIFORNIA ST 5.000% 10/01/12 FED BASIS DECREASED BY $24.95 TO $50,871.59 STATE BASIS DECREASED BY $24.95 TO $50,871.59 4/1/04 CURRENT YEAR AMORTIZATION INVESTMENTS AT TAX COST: $-24.95		
4/1/04	AMORTIZED PREMIUM ON SAN DIEGO CNTY CALIF 5.250% 4/01/07 FED BASIS DECREASED BY $52.65 TO $50,000.00 STATE BASIS DECREASED BY $52.65 TO $50,000.00 4/1/04 CURRENT YEAR AMORTIZATION INVESTMENTS AT TAX COST: $-52.65		

4564

Transaction detail continued

Date	Description	Income	Principal
5/3/04	AMORTIZED PREMIUM ON LOS ANGELES CALIF PK 5.000% 5/01/05 FED BASIS DECREASED BY $119.74 TO $50,378.34 STATE BASIS DECREASED BY $119.74 TO $50,378.34 5/1/04 CURRENT YEAR AMORTIZATION INVESTMENTS AT TAX COST: $-119.74		
6/1/04	AMORTIZED PREMIUM ON LOMA LINDA CALIF HOS 5.050% 12/01/12 FED BASIS DECREASED BY $74.68 TO $51,926.83 STATE BASIS DECREASED BY $74.68 TO,$51,926.83 6/1/04 CURRENT YEAR AMORTIZATION INVESTMENTS AT TAX COST: $-74.68		
7/1/04	AMORTIZED PREMIUM ON LOS ANGELES CNTY CAL 4.250% 7/01/06 FED BASIS DECREASED BY $623.74 TO $52,547.35 STATE BASIS DECREASED BY $623.74 TO $52,547.35 7/1/04 CURRENT YEAR AMORTIZATION INVESTMENTS AT TAX COST: $-623.74		

4565

Transaction detail continued

Date	Description	Income	Principal
7/1/04	AMORTIZED PREMIUM ON RANCHO MIRAGE CALIF 5.250% 7/01/10 FED BASIS DECREASED BY $76.87 TO $50,879.05 STATE BASIS DECREASED BY $76.87 TO $50,879.05 7/1/04 CURRENT YEAR AMORTIZATION INVESTMENTS AT TAX COST: $-76.87		
8/2/04	AMORTIZED PREMIUM ON CALIFORNIA ST DEPT 2.500% 2/01/09 FED BASIS DECREASED BY $61.92 TO $50,854.08 STATE BASIS DECREASED BY $61.92 TO $50,854.08 8/1/04 CURRENT YEAR AMORTIZATION INVESTMENTS AT TAX COST: $-61.92		
8/2/04	AMORTIZED PREMIUM ON EL PASO DE ROBLES CA 4.250% 8/01/10 FED BASIS DECREASED BY $138.34 TO $53,126.16 STATE BASIS DECREASED BY $138.34 TO $53,126.16 8/1/04 CURRENT YEAR AMORTIZATION INVESTMENTS AT TAX COST: $-138.34		

Transaction detail continued

Date	Description	Income	Principal
8/2/04	AMORTIZED PREMIUM ON LOS ANGELES CALIF CM 4.125% 8/01/11 FED BASIS DECREASED BY $177.75 TO $52,816.39 STATE BASIS DECREASED BY $177.75 TO $52,816.39 8/1/04 CURRENT YEAR AMORTIZATION INVESTMENTS AT TAX COST: $-177.75		
12/2/04	SPIN OFF RECEIVED 166.6667 SHARES DISTRIBUTION AT 0.03030303 SHARES OF NEENAH PAPER INC FOR EACH SHARE OF KIMBERLY CLARK CORP DUE 11/30/04 MARKET VALUE OF $0.00 SPIN-OFF FROM KIMBERLY CLARK CORP CUSIP: 494368103		
12/6/04	SPIN OFF FEDERAL COST BASIS OF NEENAH PAPER INC ADJUSTED BY $1,216.66 OLD: $0.00 /NEW $1,216.66 SPIN-OFF TO NEENAH PAPER INC/ CUSIP: 640079109 INVESTMENTS AT TAX COST: $1,216.66		

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Transaction detail continued

Date	Description	Income	Principal
12/6/04	SPIN OFF STATE COST BASIS OF NEENAH PAPER INC ADJUSTED BY $1,216.66 OLD: $0.00 /NEW $1,216.66 SPIN-OFF TO NEENAH PAPER INC/ CUSIP: 640079109		
12/6/04	SPIN OFF FEDERAL COST BASIS OF KIMBERLY CLARK CORP ADJUSTED BY $-1,216.66 OLD: $75,922.68 /NEW $74,706.02 SPIN-OFF TO NEENAH PAPER INC/ CUSIP: 640079109 INVESTMENTS AT TAX COST: $-1,216.66		
12/6/04	SPIN OFF STATE COST BASIS OF KIMBERLY CLARK CORP ADJUSTED BY $-1,216.66 OLD: $75,922.68 /NEW $74,706.02 SPIN-OFF TO NEENAH PAPER INC/ CUSIP: 640079109		
12/31/04	AMORTIZED PREMIUM ON CALIFORNIA ST 5.000% 10/01/12 FED BASIS DECREASED BY $91.32 TO $50,780.27 STATE BASIS DECREASED BY $91.32 TO $50,780.27 1/1/05 CURRENT YEAR AMORTIZATION INVESTMENTS AT TAX COST: $-91.32		

Transaction detail continued

Date	Description	Income	Principal
12/31/04	AMORTIZED PREMIUM ON CALIFORNIA ST DEPT 2.500% 2/01/09 FED BASIS DECREASED BY $76.20 TO $50,777.88 STATE BASIS DECREASED BY $76.20 TO $50,777.88 1/1/05 CURRENT YEAR AMORTIZATION INVESTMENTS AT TAX COST: $-76.20		
12/31/04	AMORTIZED PREMIUM ON EL PASO DE ROBLES CA 4.250% 8/01/10 FED BASIS DECREASED BY $200.08 TO $52,926.08 STATE BASIS DECREASED BY $200.08 TO $52,926.08 1/1/05 CURRENT YEAR AMORTIZATION INVESTMENTS AT TAX COST: $-200.08		
12/31/04	AMORTIZED PREMIUM ON LOMA LINDA CALIF HOS 5.050% 12/01/12 FED BASIS DECREASED BY $111.83 TO $51,815.00 STATE BASIS DECREASED BY $111.83 TO $51,815.00 1/1/05 CURRENT YEAR AMORTIZATION INVESTMENTS AT TAX COST: $-111.83		

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Transaction detail continued

Date	Description	Income	Principal
12/31/04	AMORTIZED PREMIUM ON LOS ANGELES CALIF CM 4.125% 8/01/11 FED BASIS DECREASED BY $151.45 TO $52,664.94 STATE BASIS DECREASED BY $151.45 TO $52,664.94 1/1/05 CURRENT YEAR AMORTIZATION INVESTMENTS AT TAX COST: $-151.45		
12/31/04	AMORTIZED PREMIUM ON LOS ANGELES CALIF PK 5.000% 5/01/05 FED BASIS DECREASED BY $255.79 TO $50,122.55 STATE BASIS DECREASED BY $255.79 TO $50,122.55 1/1/05 CURRENT YEAR AMORTIZATION INVESTMENTS AT TAX COST: $-255.79		
12/31/04	AMORTIZED PREMIUM ON LOS ANGELES CNTY CAL 4.250% 7/01/06 FED BASIS DECREASED BY $628.94 TO $51,918.41 STATE BASIS DECREASED BY $628.94 TO $51,918.41 1/1/05 CURRENT YEAR AMORTIZATION INVESTMENTS AT TAX COST: $-628.94		

Transaction detail continued

Date	Description	Income	Principal
12/31/04	AMORTIZED PREMIUM ON MANTECA CALIF UNI SC 4.000% 9/01/13 FED BASIS DECREASED BY $190.31 TO $52,008.22 STATE BASIS DECREASED BY $190.31 TO $52,008.22 1/1/05 CURRENT YEAR AMORTIZATION INVESTMENTS AT TAX COST: $-190.31		
12/31/04	AMORTIZED PREMIUM ON PASADENA CALIF UNI 3.250% 5/01/11 FED BASIS DECREASED BY $13.11 TO $50,426.89 STATE BASIS DECREASED BY $13.11 TO $50,426.89 1/1/05 CURRENT YEAR AMORTIZATION INVESTMENTS AT TAX COST: $-13.11		
12/31/04	AMORTIZED PREMIUM ON RANCHO MIRAGE CALIF 5.250% 7/01/10 FED BASIS DECREASED BY $78.73 TO $50,800.32 STATE BASIS DECREASED BY $78.73 TO $50,800.32 1/1/05 CURRENT YEAR AMORTIZATION INVESTMENTS AT TAX COST: $-78.73		

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Transaction detail continued

Date	Description	Income	Principal
12/31/04	ACCRETED DISCOUNT ON TEMPLE CITY CALIF UNI SCH 8/01/12 FED BASIS INCREASED BY $1,687.82 TO $34,743.95 STATE BASIS INCREASED BY $1,687.82 TO $34,743.95 1/1/05 CURRENT YEAR NON-TAXABLE OID INVESTMENTS AT TAX COST: $1,687.82		
Total other investment transactions (non-cash)		**$0.00**	**$0.00**

	Income	Principal
Ending cash balance 12/31/04	$(7,968.77)	$7,968.77

No pending trades.

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Although market values and prices for publicly-traded securities have been obtained from sources or third parties Bank One believes to be reliable, Bank One does not guarantee their accuracy. Certain assets may not be held by Bank One,and their reporting is at the request and for the convenience of the account owner. Certain assets, including, but not limited to, closely held, non-publicly-traded and infrequently traded securities, derivatives, partnership interests, tangible assets, and life insurance policy cash values cannot be readily priced. The valuation, pricing and/or transaction information is not independently verified by Bank One, is reflected as of the last date provided to Bank One and may not be current. Such information may not be determined by Bank One and may not have been provided to us by third parties who are not independent of the issuer or manager. Certain assets may be carried at cost.

This statement is not an official document for income tax reporting purposes.

When reviewing your Bond quality table, the percentages are rounded to zero when the percentage for a rating category is less than one percent.

When reviewing your Holdings detail, the market value listed for each asset may not equal quantity multiplied by share price due to rounding. The Market value column will always provide the most accurate figure.

Market values noted in the Market reconciliation and Transaction detail are as of the end of the statement period. The market value on the date of the transaction may be different.

Please be aware that the information shown in the Realized gain/(loss) column (found in the Transaction detail section of your statement) is based on TAX COST, even though the assets on your statement may be carried at Book value. Please contact your Advisor if you have questions regarding this information or any part of your statement.

Bank One or its affiliates may receive and accept from time to time 12B-1 fees, shareholder servicing fees, sub-transfer agency fees, network reimbursement fees, or other fees from unaffiliated mutual funds as described in the prospectus for the fund with respect to eligible accounts. Bank One has taken steps to avoid receiving fees with respect to ineligible accounts. If Bank One inadvertently receives any such fees for ineligible accounts, such fees will be returned to the fund's distributors or other payor.

Life Insurance values are shown at cash surrender value most recently reported by you or the Insurance Company, except where the value shown is $1.00. If the value is $1.00, we have not received a cash surrender value.

FLORIDA CLIENTS, please note that an action for breach of trust based on matters disclosed in a trust accounting or other written report of the Trustee may be subject to a 6-month statute of limitations from the receipt of the trust accounting or other written report. Questions, please consult your attorney. (FL ST sec. 737.307)

Proprietary and non-proprietary mutual funds and other securities are not insured or guaranteed by the Federal Deposit Insurance Corporation (FDIC) or any other government sponsored agency of the federal or any state government. One Group Mutual Funds are not deposits or obligations of and are not guaranteed by, JPMorgan Chase & Co. or its bank or non-bank affiliates. Affiliates of JPMorgan Chase & Co., including the legal entity providing this statement, receive fees for providing various services to the funds. Prospectuses, fee disclosure statements and annual reports for the One Group Funds are always available. For more information, please contact your advisor, One Group at (800) 480-4111 or logon to www.onegroup.com.

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BANK ONE

Annual Account Statement

EXEMPT T/U/W F SENSENBRENNER PCTAA
Account number 9500134300
January 1, 2004 - December 31, 2004

BANK ONE TRUST COMPANY, N.A.
111 E WISCONSIN AVE,12TH FLOOR
MILWAUKEE, WI 53202

www.bankone.com

Your Advisor is:
LYNN E PAULL
(414) 977-2027 or (800) 926-4556

Thank you for the opportunity to serve your financial needs. We appreciate your confidence in us.

Please remember to check the Bulletin board (located at the back of your statement) for important messages from Bank One.

Don't hesitate to contact your advisor if you have any questions, comments or concerns.

05030 02146
F JAMES SENSENBRENNER JR
609 FORT WILLIAMS PKWY
ALEXANDRIA VA 22304-1813

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BANK ONE.

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Holdings summary

	Value on December 31, 2004	Value on December 31, 2003	Change in value
Cash equivalents	$3,428.06		
Equities	4,123,786.63		
Fixed income	0.00		
Other	0.00		
Total holdings	**$4,127,214.69**	$3,878,665.40	**$248,549.29**
Accruals (income earned but not yet received)	$15,161.08		
Total holdings with accruals	**$4,142,375.77**		

Income summary

Income	Statement period	January 1 to December 31
Dividends (domestic/foreign/mutual fund income)	$88,374.16	$88,374.16
Interest (taxable/non-taxable)	392.06	392.06
Other income	0.00	0.00
Total income	$88,766.22	$88,766.22
Realized gain/(loss)		
	$255,542.57	$255,542.57

The income summary includes taxable and tax-exempt income for both principal and income beneficiaries, please refer to the Transaction detail for an income breakdown. These amounts represent approximate income and gain/(loss) amounts and should not be used for final Internal Revenue Service reporting.

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Market reconciliation

	Statement period	January 1 to December 31
Beginning market value	$3,878,665.40	$3,878,665.40
Receipts	127,994.31	127,994.31
Disbursements	(376,961.82)	(376,961.82)
Income	88,766.22	88,766.22
Capital gains distributions	4,938.22	4,938.22
Change in asset market value	403,812.36	403,812.36
Ending market value	$4,127,214.69	$4,127,214.69

The Market reconciliation provides a summary of all activity in the account. The Receipts and Disbursements categories may include Non-Cash Transactions such as transfers within the account, name change transactions, asset receipts and distributions, and stock split transactions. The Transaction detail section provides an itemized list of all transactions. The Transaction summary provides a summary of cash receipt and disbursement transactions.

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Transaction summary

	Income	Principal
Beginning cash balance 1/1/04	$(21,869.60)	$21,869.60
Cash receipts		
Dividends (domestic/foreign/mutual fund income)	$82,374.16	$6,000.00
Interest (taxable/non-taxable)	392.06	0.00
Other cash receipts	21,869.60	5,197.78
Total cash receipts	$104,635.82	$11,197.78
Cash disbursements		
Cash disbursements	$(124,005.49)	$(130,299.25)
Administrative expenses	(9,864.02)	(8,804.06)
Total cash disbursements	$(133,869.51)	$(139,103.31)
Investment transactions		
Purchases	$0.00	$(635,076.49)
Sales and maturities	0.00	792,215.71
Total investment transactions	$0.00	$157,139.22
Ending cash balance 12/31/04	$(51,103.29)	$51,103.29

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BANK ONE.

Only the Asset allocation analysis includes mutual fund holdings. The Bond quality and maturity analyses (if applicable) are displayed excluding mutual funds.

Investment objective: Growth

This strategy seeks to provide long-term capital appreciation and overall returns that are competitive with the general equity market by investing at least 80% of its assets in equity securities. Current income is a secondary consideration. Principal volatility is expected to be relatively high.

Asset allocation

0.1% - Cash equivalents

99.9% - Equities
- 50.2% - *Consumer non-durable*
- 7.7% - *Technology*
- 7.5% - *Banks*
- 6.4% - *Finance*
- 6.3% - *Health care*
- 21.8% - *Other equities*

The Asset allocation may not be exactly as described in the Investment objective due to Other Asset holdings.

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Holdings detail

Cash equivalents

Very liquid assets

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
ONE GROUP PRIME MONEY MARKET FUND	3,428.060	1.000	$3,428.06	$3,428.06	$0.00	1.73%	$59.31
INCOME CASH	(51,103.290)	1.000	(51,103.29)	(51,103.29)	0.00	0.00%	0.00
PRINCIPAL CASH	51,103.290	1.000	51,103.29	51,103.29	0.00	0.00%	0.00
Total cash equivalents			$3,428.06	$3,428.06	$0.00		$59.31

Equities

Banks

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
BANK OF AMERICA CORP	1,600.000	46.990	$75,184.00	$8,767.00	$66,417.00	3.83%	$2,880.00
JPMORGAN CHASE & CO	3,102.000	39.010	121,009.02	20,051.42	100,957.60	3.49%	4,218.72
US BANCORP DEL NEW	3,648.000	31.320	114,255.36	9,315.14	104,940.22	3.83%	4,377.60
Total banks			$310,448.38	$38,133.56	$272,314.82		$11,476.32
Capital equipment							
GENERAL ELEC CO	1,300.000	38.500	47,450.00	38,171.70	9,278.30	2.41%	1,144.00
TYCO INTL LTD NEW	1,900.000	35.740	67,906.00	37,509.00	30,397.00	1.12%	760.00
3M CO	400.000	82.070	32,828.00	25,570.00	7,258.00	1.75%	576.00
Total capital equipment			$148,184.00	$101,250.70	$46,933.30		$2,480.00
Consumer capital spending							
JOHNSON CTLS INC	800.000	63.440	50,752.00	5,700.00	45,052.00	1.58%	800.00

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Holdings detail continued

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
Consumer cyclical							
COMCAST CORP NEW CL A	1,374.000	33.280	$45,726.72	$38,590.47	$7,136.25	0.00%	$0.00
VIACOM INC CL B	1,000.000	36.390	36,390.00	42,124.00	(5,734.00)	0.77%	280.00
Total consumer cyclical			$82,116.72	$80,714.47	$1,402.25		$280.00
Consumer non-durable							
KIMBERLY CLARK CORP	31,500.000	65.810	2,073,015.00	427,861.73	1,645,153.27	2.43%	50,400.00
Energy							
CHEVRONTEXACO CORP	1,000.000	52.510	52,510.00	45,125.00	7,385.00	3.05%	1,600.00
EXXON MOBIL CORP	1,000.000	51.260	51,260.00	36,841.80	14,418.20	2.11%	1,080.00
UNOCAL CORP	524.000	43.240	22,657.76	8,695.13	13,962.63	1.85%	419.20
Total energy			$126,427.76	$90,661.93	$35,765.83		$3,099.20
Finance							
AMERICAN INTL GROUP INC	750.000	65.670	49,252.50	42,644.50	6,608.00	0.46%	225.00
BEAR STEARNS COS INC	500.000	102.310	51,155.00	40,224.00	10,931.00	0.98%	500.00
CITIGROUP INC	1,250.000	48.180	60,225.00	56,346.00	3,879.00	3.32%	2,000.00
FHLMC	750.000	73.700	55,275.00	39,400.00	15,875.00	1.63%	900.00
MBNA CORP	1,700.000	28.190	47,923.00	37,014.00	10,909.00	1.70%	816.00
Total finance			$263,830.50	$215,628.50	$48,202.00		$4,441.00
Health care							
AMGEN INC	800.000	64.150	51,320.00	50,618.50	701.50	0.00%	0.00
JOHNSON & JOHNSON	1,000.000	63.420	63,420.00	50,758.50	12,661.50	1.80%	1,140.00
MEDTRONIC INC	800.000	49.670	39,736.00	37,351.00	2,385.00	0.67%	268.00

Holdings detail continued

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
PFIZER INC	1,500.000	26.890	$40,335.00	$49,863.00	$(9,528.00)	2.83%	$1,140.00
UNITEDHEALTH GROUP INC	750.000	88.030	66,022.50	47,478.75	18,543.75	0.03%	22.50
Total health care			$260,833.50	$236,069.75	$24,763.75		$2,570.50
Industrial commodities							
NEENAH PAPER INC	954.000	32.600	31,100.40	6,964.17	24,136.23	0.00%	0.00
Mutual funds							
ONE GROUP MID CAP GROWTH FUND	2,978.422	24.050	71,631.05	60,675.05	10,956.00	0.00%	0.00
ONE GROUP MID CAP VALUE FUND	3,939.556	18.160	71,542.34	60,197.39	11,344.95	0.61%	433.35
ONE GROUP SMALL CAP GROWTH FUND	2,546.252	12.990	33,075.81	25,499.32	7,576.49	0.00%	0.00
ONE GROUP SMALL CAP VALUE FUND	1,202.384	25.240	30,348.17	25,261.54	5,086.63	0.28%	86.57
Total mutual funds			$206,597.37	$171,633.30	$34,964.07		$519.92
Other utilities							
DOMINION RES INC VA NEW	500.000	67.740	33,870.00	32,052.00	1,818.00	3.93%	1,330.00
SOUTHERN CO	400.000	33.520	13,408.00	2,802.50	10,605.50	4.27%	572.00
Total other utilities			$47,278.00	$34,854.50	$12,423.50		$1,902.00
Retail							
HOME DEPOT INC	1,000.000	42.740	42,740.00	36,183.00	6,557.00	0.80%	340.00
KOHLS CORP	650.000	49.170	31,960.50	34,324.50	(2,364.00)	0.00%	0.00

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Holdings detail continued

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
TARGET CORP	950.000	51.930	$49,333.50	$36,280.00	$13,053.50	0.62%	$304.00
Total retail			$124,034.00	$106,787.50	$17,246.50		$644.00
Technology							
CISCO SYS INC	3,200.000	19.320	61,824.00	63,933.00	(2,109.00)	0.00%	0.00
DELL INC	1,500.000	42.140	63,210.00	50,115.00	13,095.00	0.00%	0.00
HEWLETT PACKARD CO	1,500.000	20.970	31,455.00	32,292.00	(837.00)	1.53%	480.00
INTEL CORP	3,000.000	23.390	70,170.00	79,492.00	(9,322.00)	1.37%	960.00
MICROSOFT CORP	2,000.000	26.720	53,440.00	52,748.00	692.00	1.20%	640.00
TEXAS INSTRS INC	1,500.000	24.620	36,930.00	36,705.00	225.00	0.41%	150.00
Total technology			$317,029.00	$315,285.00	$1,744.00		$2,230.00
Telephone utilities							
VERIZON COMMUNICATIONS	600.000	40.510	24,306.00	23,400.00	906.00	3.80%	924.00
Transportation							
CSX CORP	1,000.000	40.080	40,080.00	29,420.00	10,660.00	1.00%	400.00
UNION PAC CORP	264.000	67.250	17,754.00	5,147.89	12,606.11	1.78%	316.80
Total transportation			$57,834.00	$34,567.89	$23,266.11		$716.80
Total equities			$4,123,786.63	$1,889,513.00	$2,234,273.63		$82,483.74
Total holdings			**$4,127,214.69**	**$1,892,941.06**	**$2,234,273.63**		**$82,543.05**

Holdings detail continued

Accruals (income earned but not yet received)	$15,161.08
Total holdings with accruals	**$4,142,375.77**

Assets identified with an asterisk (*) at the beginning of the asset name are held in the Invested Income Portfolio.

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Transaction detail

	Income	Principal
Beginning cash balance 1/1/04	$(21,869.60)	$21,869.60

Cash receipts

Foreign dividends

Date	Description	Realized gain/(loss)	Income	Principal
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON TYCO INTL LTD NEW $0.0125/SHARE ON 1,900 SHARES DUE 2/2/04 FOREIGN CASH DIVIDEND		$23.75	
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON TYCO INTL LTD NEW $0.0125/SHARE ON 1,900 SHARES DUE 5/3/04 FOREIGN CASH DIVIDEND		23.75	
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON TYCO INTL LTD NEW $0.0125/SHARE ON 1,900 SHARES DUE 8/2/04 FOREIGN CASH DIVIDEND		23.75	
11/1/04	CASH RECEIPT CASH DIVIDEND TYCO INTL LTD NEW FOREIGN CASH DIVIDEND		23.75	
Total foreign dividends			$95.00	$0.00

Transaction detail continued

Domestic dividends

Date	Description	Realized gain/(loss)	Income	Principal
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON BANK ONE CORP $0.25/SHARE ON 2,039 SHARES DUE 1/1/04		$509.75	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON MBNA CORP $0.10/SHARE ON 1,700 SHARES DUE 1/1/04		170.00	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON VIACOM INC CL B $0.06/SHARE ON 1,000 SHARES DUE 1/1/04		60.00	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON BURLINGTON NORTHN SANTA FE CORP $0.15/SHARE ON 105 SHARES DUE 1/2/04		15.75	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON JOHNSON CTLS INC $0.45/SHARE ON 400 SHARES DUE 1/2/04		180.00	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON UNION PAC CORP $0.30/SHARE ON 264 SHARES DUE 1/2/04		79.20	
1/5/04	CASH RECEIPT OF DIVIDEND EARNED ON KIMBERLY CLARK CORP $0.34/SHARE ON 43,015 SHARES DUE 1/5/04		14,625.10	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
1/15/04	CASH RECEIPT OF DIVIDEND EARNED ON US BANCORP DEL NEW $0.24/SHARE ON 3,648 SHARES DUE 1/15/04		$875.52	
1/23/04	CASH RECEIPT OF DIVIDEND EARNED ON MEDTRONIC INC $0.0725/SHARE ON 800 SHARES DUE 1/23/04		58.00	
1/26/04	CASH RECEIPT OF DIVIDEND EARNED ON GENERAL ELEC CO $0.20/SHARE ON 1,300 SHARES DUE 1/26/04		260.00	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON J P MORGAN CHASE & CO $0.34/SHARE ON 411 SHARES DUE 1/31/04		139.74	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON VERIZON COMMUNICATIONS $0.385/SHARE ON 600 SHARES DUE 2/2/04		231.00	
2/9/04	CASH RECEIPT OF DIVIDEND EARNED ON UNOCAL CORP $0.20/SHARE ON 524 SHARES DUE 2/9/04		104.80	
2/27/04	CASH RECEIPT OF DIVIDEND EARNED ON CITIGROUP INC $0.40/SHARE ON 950 SHARES DUE 2/27/04		380.00	
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON AMERISOURCEBERGEN CORP $0.025/SHARE ON 650 SHARES DUE 3/1/04		16.25	

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON INTEL CORP $0.04/SHARE ON 3,000 SHARES DUE 3/1/04		$120.00	
3/5/04	CASH RECEIPT OF DIVIDEND EARNED ON MICROCHIP TECHNOLOGY INC $0.035/SHARE ON 1,400 SHARES DUE 3/5/04		49.00	
3/5/04	CASH RECEIPT OF DIVIDEND EARNED ON PFIZER INC $0.17/SHARE ON 1,000 SHARES DUE 3/5/04		170.00	
3/8/04	CASH RECEIPT OF DIVIDEND EARNED ON SOUTHERN CO $0.35/SHARE ON 400 SHARES DUE 3/6/04		140.00	
3/9/04	CASH RECEIPT OF DIVIDEND EARNED ON JOHNSON & JOHNSON $0.24/SHARE ON 650 SHARES DUE 3/9/04		156.00	
3/10/04	CASH RECEIPT OF DIVIDEND EARNED ON ELECTRONIC DATA SYS CORP NEW $0.15/SHARE ON 448 SHARES DUE 3/10/04		67.20	
3/10/04	CASH RECEIPT OF DIVIDEND EARNED ON EXXON MOBIL CORP $0.25/SHARE ON 1,000 SHARES DUE 3/10/04		250.00	
3/10/04	CASH RECEIPT OF DIVIDEND EARNED ON TARGET CORP $0.07/SHARE ON 950 SHARES DUE 3/10/04		66.50	

4591

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
3/12/04	CASH RECEIPT OF DIVIDEND EARNED ON 3M CO $0.36/SHARE ON 400 SHARES DUE 3/12/04		$144.00	
3/19/04	CASH RECEIPT OF DIVIDEND EARNED ON AMERICAN INTL GROUP INC $0.065/SHARE ON 750 SHARES DUE 3/19/04		48.75	
3/24/04	CASH RECEIPT OF DIVIDEND EARNED ON ANADARKO PETE CORP $0.14/SHARE ON 101 SHARES DUE 3/24/04		14.14	
3/26/04	CASH RECEIPT OF DIVIDEND EARNED ON BANK OF AMERICA CORP $0.80/SHARE ON 800 SHARES DUE 3/26/04		640.00	
3/31/04	CASH RECEIPT OF DIVIDEND EARNED ON FHLMC $0.30/SHARE ON 750 SHARES DUE 3/31/04		225.00	
3/31/04	CASH RECEIPT OF DIVIDEND EARNED ON JOHNSON CTLS INC $0.225/SHARE ON 800 SHARES DUE 3/31/04		180.00	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON BANK ONE CORP $0.44875/SHARE ON 2,039 SHARES DUE 4/1/04		915.00	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON BURLINGTON NORTHN SANTA FE CORP $0.15/SHARE ON 105 SHARES DUE 4/1/04		15.75	

4592

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON MBNA CORP $0.12/SHARE ON 1,700 SHARES DUE 4/1/04		$204.00	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON UNION PAC CORP $0.30/SHARE ON 264 SHARES DUE 4/1/04		79.20	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON VIACOM INC CL B $0.06/SHARE ON 1,000 SHARES DUE 4/1/04		60.00	
4/2/04	CASH RECEIPT OF DIVIDEND EARNED ON KIMBERLY CLARK CORP $0.40/SHARE ON 36,640 SHARES DUE 4/2/04		14,656.00	
4/15/04	CASH RECEIPT OF DIVIDEND EARNED ON US BANCORP DEL NEW $0.24/SHARE ON 3,648 SHARES DUE 4/15/04		875.52	
4/16/04	CASH RECEIPT OF DIVIDEND EARNED ON UNITEDHEALTH GROUP INC $0.03/SHARE ON 750 SHARES DUE 4/16/04		22.50	
4/26/04	CASH RECEIPT OF DIVIDEND EARNED ON GENERAL ELEC CO $0.20/SHARE ON 1,300 SHARES DUE 4/26/04		260.00	
4/30/04	CASH RECEIPT OF DIVIDEND EARNED ON J P MORGAN CHASE & CO $0.34/SHARE ON 411 SHARES DUE 4/30/04		139.74	

4593

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
4/30/04	CASH RECEIPT OF DIVIDEND EARNED ON MEDTRONIC INC $0.0725/SHARE ON 800 SHARES DUE 4/30/04		$58.00	
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON VERIZON COMMUNICATIONS $0.385/SHARE ON 600 SHARES DUE 5/3/04		231.00	
5/12/04	CASH RECEIPT OF DIVIDEND EARNED ON UNOCAL CORP $0.20/SHARE ON 524 SHARES DUE 5/12/04		104.80	
5/28/04	CASH RECEIPT OF DIVIDEND EARNED ON CITIGROUP INC $0.40/SHARE ON 950 SHARES DUE 5/28/04		380.00	
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON INTEL CORP $0.04/SHARE ON 3,000 SHARES DUE 6/1/04		120.00	
6/4/04	CASH RECEIPT OF DIVIDEND EARNED ON PFIZER INC $0.17/SHARE ON 1,250 SHARES DUE 6/4/04		212.50	
6/7/04	CASH RECEIPT OF DIVIDEND EARNED ON SOUTHERN CO $0.35/SHARE ON 400 SHARES DUE 6/5/04		140.00	
6/7/04	CASH RECEIPT OF DIVIDEND EARNED ON AMERISOURCEBERGEN CORP $0.025/SHARE ON 650 SHARES DUE 6/7/04		16.25	

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
6/8/04	CASH RECEIPT OF DIVIDEND EARNED ON JOHNSON & JOHNSON $0.285/SHARE ON 1,000 SHARES DUE 6/8/04		$285.00	
6/10/04	CASH RECEIPT OF DIVIDEND EARNED ON EXXON MOBIL CORP $0.27/SHARE ON 1,000 SHARES DUE 6/10/04		270.00	
6/10/04	CASH RECEIPT OF DIVIDEND EARNED ON TARGET CORP $0.07/SHARE ON 950 SHARES DUE 6/10/04		66.50	
6/14/04	CASH RECEIPT OF DIVIDEND EARNED ON 3M CO $0.36/SHARE ON 400 SHARES DUE 6/12/04		144.00	
6/15/04	CASH RECEIPT OF DIVIDEND EARNED ON CSX CORP $0.10/SHARE ON 1,000 SHARES DUE 6/15/04		100.00	
6/18/04	CASH RECEIPT OF DIVIDEND EARNED ON AMERICAN INTL GROUP INC $0.065/SHARE ON 750 SHARES DUE 6/18/04		48.75	
6/21/04	CASH RECEIPT OF DIVIDEND EARNED ON DOMINION RES INC VA NEW $0.645/SHARE ON 500 SHARES DUE 6/20/04		322.50	
6/23/04	CASH RECEIPT OF DIVIDEND EARNED ON ANADARKO PETE CORP $0.14/SHARE ON 101 SHARES DUE 6/23/04		14.14	

4595

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
6/24/04	CASH RECEIPT OF DIVIDEND EARNED ON HOME DEPOT INC $0.085/SHARE ON 1,000 SHARES DUE 6/24/04		$85.00	
6/25/04	CASH RECEIPT OF DIVIDEND EARNED ON BANK OF AMERICA CORP $0.80/SHARE ON 800 SHARES DUE 6/25/04		640.00	
6/30/04	CASH RECEIPT OF DIVIDEND EARNED ON FHLMC $0.30/SHARE ON 750 SHARES DUE 6/30/04		225.00	
6/30/04	CASH RECEIPT OF DIVIDEND EARNED ON JOHNSON CTLS INC $0.225/SHARE ON 800 SHARES DUE 6/30/04		180.00	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON MBNA CORP $0.12/SHARE ON 1,700 SHARES DUE 7/1/04		204.00	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON UNION PAC CORP $0.30/SHARE ON 264 SHARES DUE 7/1/04		79.20	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON VIACOM INC CL B $0.06/SHARE ON 1,000 SHARES DUE 7/1/04		60.00	
7/2/04	CASH RECEIPT OF DIVIDEND EARNED ON KIMBERLY CLARK CORP $0.40/SHARE ON 34,000 SHARES DUE 7/2/04		13,600.00	

4596

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
7/15/04	CASH RECEIPT OF DIVIDEND EARNED ON US BANCORP DEL NEW $0.24/SHARE ON 3,648 SHARES DUE 7/15/04		$875.52	
7/26/04	CASH RECEIPT OF DIVIDEND EARNED ON GENERAL ELEC CO $0.20/SHARE ON 1,300 SHARES DUE 7/26/04		260.00	
7/30/04	CASH RECEIPT OF DIVIDEND EARNED ON BEAR STEARNS COS INC $0.20/SHARE ON 500 SHARES DUE 7/30/04		100.00	
7/30/04	CASH RECEIPT OF DIVIDEND EARNED ON MEDTRONIC INC $0.08375/SHARE ON 800 SHARES DUE 7/30/04		67.00	
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON JPMORGAN CHASE & CO $0.34/SHARE ON 3,102.48 SHARES DUE 7/31/04		1,054.84	
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON VERIZON COMMUNICATIONS $0.385/SHARE ON 600 SHARES DUE 8/2/04		231.00	
8/12/04	CASH RECEIPT OF DIVIDEND EARNED ON UNOCAL CORP $0.20/SHARE ON 524 SHARES DUE 8/12/04		104.80	
8/16/04	CASH RECEIPT OF DIVIDEND EARNED ON TEXAS INSTRS INC $0.02125/SHARE ON 1,500 SHARES DUE 8/16/04		31.88	

4597

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
8/27/04	CASH RECEIPT OF DIVIDEND EARNED ON CITIGROUP INC $0.40/SHARE ON 1,250 SHARES DUE 8/27/04		$500.00	
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON INTEL CORP $0.04/SHARE ON 3,000 SHARES DUE 9/1/04		120.00	
9/3/04	CASH RECEIPT OF DIVIDEND EARNED ON PFIZER INC $0.17/SHARE ON 1,500 SHARES DUE 9/3/04		255.00	
9/7/04	CASH RECEIPT OF DIVIDEND EARNED ON SOUTHERN CO $0.3575/SHARE ON 400 SHARES DUE 9/4/04		143.00	
9/7/04	CASH RECEIPT OF DIVIDEND EARNED ON JOHNSON & JOHNSON $0.285/SHARE ON 1,000 SHARES DUE 9/7/04		285.00	
9/10/04	CASH RECEIPT OF DIVIDEND EARNED ON CHEVRONTEXACO CORP $0.80/SHARE ON 500 SHARES DUE 9/10/04		400.00	
9/10/04	CASH RECEIPT OF DIVIDEND EARNED ON EXXON MOBIL CORP $0.27/SHARE ON 1,000 SHARES DUE 9/10/04		270.00	
9/10/04	CASH RECEIPT OF DIVIDEND EARNED ON TARGET CORP $0.08/SHARE ON 950 SHARES DUE 9/10/04		76.00	

4598

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
9/13/04	CASH RECEIPT OF DIVIDEND EARNED ON 3M CO $0.36/SHARE ON 400 SHARES DUE 9/12/04		$144.00	
9/14/04	CASH RECEIPT OF DIVIDEND EARNED ON MICROSOFT CORP $0.08/SHARE ON 2,000 SHARES DUE 9/14/04		160.00	
9/15/04	CASH RECEIPT OF DIVIDEND EARNED ON CSX CORP $0.10/SHARE ON 1,000 SHARES DUE 9/15/04		100.00	
9/16/04	CASH RECEIPT OF DIVIDEND EARNED ON HOME DEPOT INC $0.085/SHARE ON 1,000 SHARES DUE 9/16/04		85.00	
9/17/04	CASH RECEIPT OF DIVIDEND EARNED ON AMERICAN INTL GROUP INC $0.075/SHARE ON 750 SHARES DUE 9/17/04		56.25	
9/20/04	CASH RECEIPT OF DIVIDEND EARNED ON DOMINION RES INC VA NEW $0.645/SHARE ON 500 SHARES DUE 9/20/04		322.50	
9/24/04	CASH RECEIPT OF DIVIDEND EARNED ON BANK OF AMERICA CORP $0.45/SHARE ON 1,600 SHARES DUE 9/24/04		720.00	
9/30/04	CASH RECEIPT OF DIVIDEND EARNED ON FHLMC $0.30/SHARE ON 750 SHARES DUE 9/30/04		225.00	

4599

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
9/30/04	CASH RECEIPT OF DIVIDEND EARNED ON JOHNSON CTLS INC $0.225/SHARE ON 800 SHARES DUE 9/30/04		$180.00	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON MBNA CORP $0.12/SHARE ON 1,700 SHARES DUE 10/1/04		204.00	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON UNION PAC CORP $0.30/SHARE ON 264 SHARES DUE 10/1/04		79.20	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON VIACOM INC CL B $0.06/SHARE ON 1,000 SHARES DUE 10/1/04		60.00	
10/4/04	CASH RECEIPT OF DIVIDEND EARNED ON KIMBERLY CLARK CORP $0.40/SHARE ON 31,500 SHARES DUE 10/4/04		12,600.00	
10/6/04	CASH RECEIPT OF DIVIDEND EARNED ON HEWLETT PACKARD CO $0.08/SHARE ON 1,500 SHARES DUE 10/6/04		120.00	
10/15/04	CASH RECEIPT OF DIVIDEND EARNED ON US BANCORP DEL NEW $0.24/SHARE ON 3,648 SHARES DUE 10/15/04		875.52	
10/25/04	CASH RECEIPT OF DIVIDEND EARNED ON GENERAL ELEC CO $0.20/SHARE ON 1,300 SHARES DUE 10/25/04		260.00	

4600

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
10/29/04	CASH RECEIPT OF DIVIDEND EARNED ON BEAR STEARNS COS INC $0.25/SHARE ON 500 SHARES DUE 10/29/04		$125.00	
10/29/04	CASH RECEIPT OF DIVIDEND EARNED ON MEDTRONIC INC $0.08375/SHARE ON 800 SHARES DUE 10/29/04		67.00	
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON JPMORGAN CHASE & CO $0.34/SHARE ON 3,102 SHARES DUE 10/31/04		1,054.68	
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON VERIZON COMMUNICATIONS $0.385/SHARE ON 600 SHARES DUE 11/1/04		231.00	
11/12/04	CASH RECEIPT OF DIVIDEND EARNED ON UNOCAL CORP $0.20/SHARE ON 524 SHARES DUE 11/12/04		104.80	
11/22/04	CASH RECEIPT OF DIVIDEND EARNED ON TEXAS INSTRS INC $0.025/SHARE ON 1,500 SHARES DUE 11/22/04		37.50	
11/24/04	CASH RECEIPT OF DIVIDEND EARNED ON CITIGROUP INC $0.40/SHARE ON 1,250 SHARES DUE 11/24/04		500.00	
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON INTEL CORP $0.04/SHARE ON 3,000 SHARES DUE 12/1/04		120.00	

4601

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
12/2/04	SPECIAL CASH DIVIDEND 2,000 SHARES/PAR VALUE OF MICROSOFT CORP PAYABLE AT $3.00 DUE 12/02/04 TOTAL INCOME $6,000.00			$6,000.00
12/2/04	CASH RECEIPT OF DIVIDEND EARNED ON MICROSOFT CORP $0.08/SHARE ON 2,000 SHARES DUE 12/2/04		$160.00	
12/3/04	CASH RECEIPT OF DIVIDEND EARNED ON PFIZER INC $0.17/SHARE ON 1,500 SHARES DUE 12/3/04		255.00	
12/6/04	CASH RECEIPT OF DIVIDEND EARNED ON SOUTHERN CO $0.3575/SHARE ON 400 SHARES DUE 12/6/04		143.00	
12/7/04	CASH RECEIPT OF DIVIDEND EARNED ON JOHNSON & JOHNSON $0.285/SHARE ON 1,000 SHARES DUE 12/7/04		285.00	
12/10/04	CASH RECEIPT OF DIVIDEND EARNED ON CHEVRONTEXACO CORP $0.40/SHARE ON 1,000 SHARES DUE 12/10/04		400.00	
12/10/04	CASH RECEIPT OF DIVIDEND EARNED ON EXXON MOBIL CORP $0.27/SHARE ON 1,000 SHARES DUE 12/10/04		270.00	

4602

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
12/10/04	CASH RECEIPT OF DIVIDEND EARNED ON TARGET CORP $0.08/SHARE ON 950 SHARES DUE 12/10/04		$76.00	
12/13/04	CASH RECEIPT OF DIVIDEND EARNED ON 3M CO $0.36/SHARE ON 400 SHARES DUE 12/12/04		144.00	
12/15/04	CASH RECEIPT OF DIVIDEND EARNED ON CSX CORP $0.10/SHARE ON 1,000 SHARES DUE 12/15/04		100.00	
12/16/04	CASH RECEIPT OF DIVIDEND EARNED ON HOME DEPOT INC $0.085/SHARE ON 1,000 SHARES DUE 12/16/04		85.00	
12/17/04	CASH RECEIPT OF DIVIDEND EARNED ON AMERICAN INTL GROUP INC $0.075/SHARE ON 750 SHARES DUE 12/17/04		56.25	
12/20/04	CASH RECEIPT OF DIVIDEND EARNED ON DOMINION RES INC VA NEW $0.665/SHARE ON 500 SHARES DUE 12/20/04		332.50	
12/22/04	CASH RECEIPT OF DIVIDEND EARNED ON BANK OF AMERICA CORP $0.45/SHARE ON 1,600 SHARES DUE 12/22/04		720.00	

4603

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
12/31/04	CASH RECEIPT OF DIVIDEND EARNED ON FHLMC $0.30/SHARE ON 750 SHARES DUE 12/31/04		$225.00	
Total domestic dividends			$81,247.29	$6,000.00
Mutual fund income				
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.025871/SHARE ON 3,939.556 SHARES DUE 1/2/04		101.92	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.020931/SHARE ON 1,202.384 SHARES DUE 1/2/04		25.17	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP ULTRA SHORT-TERM BOND FUND DIVIDEND FROM 12/1/03 TO 12/31/03		136.65	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP ULTRA SHORT-TERM BOND FUND DIVIDEND FROM 1/1/04 TO 1/31/04		130.44	
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP ULTRA SHORT-TERM BOND FUND DIVIDEND FROM 2/1/04 TO 2/29/04		130.44	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.015312/SHARE ON 3,939.556 SHARES DUE 4/1/04		60.32	

4604

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.021058/SHARE ON 1,202.384 SHARES DUE 4/1/04		$25.32	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP ULTRA SHORT-TERM BOND FUND DIVIDEND FROM 3/1/04 TO 3/31/04		56.79	
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP ULTRA SHORT-TERM BOND FUND DIVIDEND FROM 4/1/04 TO 4/30/04		56.79	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.040723/SHARE ON 3,939.556 SHARES DUE 7/1/04		160.43	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.003055/SHARE ON 1,202.384 SHARES DUE 7/1/04		3.67	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.02841/SHARE ON 3,939.556 SHARES DUE 10/1/04		111.92	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.026621/SHARE ON 1,202.384 SHARES DUE 10/1/04		32.01	
Total mutual fund income			$1,031.87	$0.00

4605

Transaction detail continued

Taxable Interest

Date	Description	Realized gain/(loss)	Income	Principal
1/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 12/1/03 TO 12/31/03		$6.59	
2/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 1/1/04 TO 1/31/04		11.22	
3/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 2/1/04 TO 2/29/04		11.19	
4/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 3/1/04 TO 3/31/04		24.48	
5/3/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 4/1/04 TO 4/30/04		24.88	
6/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 5/1/04 TO 5/31/04		24.22	
7/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 6/1/04 TO 6/30/04		39.95	
8/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 7/1/04 TO 7/31/04		53.13	

4606

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
9/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 8/1/04 TO 8/31/04		$63.64	
10/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 9/1/04 TO 9/30/04		54.21	
11/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 10/1/04 TO 10/31/04		39.30	
12/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 11/1/04 TO 11/30/04		39.25	
Total taxable interest			$392.06	$0.00
Other cash receipts				
1/14/04	CASH RECEIPT TRANSFER FROM PRINCIPAL		21,869.60	
11/18/04	CASH RECEIPT CLASS ACTION SETTLEMENT CLASS ACTION PROCEEDS FROM NATIONSBANK SECURITIES LITIGATION PROCEEDS RCVD FROM CLOSED ACCOUNT-9572007410			$259.56

4607

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP SMALL CAP GROWTH FUND $0.058/SHARE ON 2,546.252 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $147.71 ON FEDERAL COST LT CAPITAL GAIN OF $147.71 ON STATE COST	$147.71		$147.71
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP MID CAP VALUE FUND $0.5507/SHARE ON 3,939.558 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $2,169.59 ON FEDERAL COST LT CAPITAL GAIN OF $2,169.59 ON STATE COST	2,169.59		2,169.59
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP SMALL CAP VALUE FUND $2.1798/SHARE ON 1,202.384 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $2,620.92 ON FEDERAL COST LT CAPITAL GAIN OF $2,620.92 ON STATE COST	2,620.92		2,620.92
Total other cash receipts			$21,869.60	$5,197.78
Total cash receipts			**$104,635.82**	**$11,197.78**

Cash disbursements

Other cash disbursements

Date	Description	Income	Principal
1/14/04	CASH DISBURSEMENT TRANSFER TO INCOME		$(21,869.60)

Transaction detail continued

Date	Description	Income	Principal
3/31/04	CASH DISBURSEMENT PAID TO ACCOUNT # 9572070510 TO ANOTHER ACCOUNT PAID FOR MARGARET ANITA SENSENBRENNER TRANSFER FROM 9500134300 TO 9572070510	$(28,865.53)	
4/5/04	CASH DISBURSEMENT PAID TO U S TREASURY FIDUCIARY FEDERAL INCOME TAX ***WITX TAX DUE ON FORM 1041 FOR CALENDAR YR RETUR		$(39,994.00)
4/5/04	CASH DISBURSEMENT PAID TO WISCONSIN DEPT OF REVENUE FIDUCIARY STATE INCOME TAX ***WITX TAX DUE ON STATE FIDUCIARY CALENDAR YR RTN		(7,062.00)
6/10/04	CASH DISBURSEMENT PAID TO U S TREASURY FIDUCIARY EST FED INCOME TAX ***WITX FEDERAL ESTIMATED TAX		(24,788.00)
6/10/04	CASH DISBURSEMENT PAID TO WISCONSIN DEPT OF REVENUE FIDUCIARY EST STATE TAX ***WITX INSTALLMENT ON STATE FIDUCIARY INCOME TAX		(4,241.00)

4609

Transaction detail continued

Date	Description	Income	Principal
6/30/04	CASH DISBURSEMENT PAID TO ACCOUNT # 9572070510 TO ANOTHER ACCOUNT PAID FOR MARGARET ANITA SENSENBRENNER TRANSFER FROM 9500134300 TO 9572070510	$(28,865.53)	
9/9/04	CASH DISBURSEMENT PAID TO U S TREASURY FIDUCIARY EST FED INCOME TAX ***WITX FEDERAL ESTIMATED TAX		$(18,547.00)
9/9/04	CASH DISBURSEMENT PAID TO WISCONSIN DEPT OF REVENUE FIDUCIARY EST STATE TAX ***WITX INSTALLMENT ON STATE FIDUCIARY INCOME TAX		(3,228.00)
9/30/04	CASH DISBURSEMENT PAID TO ACCOUNT # 9572070510 TO ANOTHER ACCOUNT PAID FOR MARGARET ANITA SENSENBRENNER TRANSFER FROM 9500134300 TO 9572070510	(28,865.53)	
11/22/04	CASH DISBURSEMENT PAID TO BANK ONE SVG4941588070 ACH TRANSFER TO SAVINGS ACCT PAID FOR F JAMES SENSENBRENNER JR 075000019-4941588070		(8,543.36)

4610

Transaction detail continued

Date	Description	Income	Principal
11/22/04	CASH DISBURSEMENT PAID TO BANK ONE SVG4941588070 ACH TRANSFER TO SAVINGS ACCT PAID FOR F JAMES SENSENBRENNER JR 075000019-4941588070	$(8,543.37)	
12/30/04	CASH DISBURSEMENT PAID TO FOLEY & LARDNER LLP LEGAL FEE FOR SVCS RENDERED A/C #018423-0101 INV #25109152 F. JAMES SENSENBRENNER JR. CK #384334		$(2,026.29)
12/31/04	CASH DISBURSEMENT PAID TO ACCOUNT # 9572070510 TO ANOTHER ACCOUNT PAID FOR MARGARET ANITA SENSENBRENNER TRANSFER FROM 9500134300 TO 9572070510	(28,865.53)	
Total other cash disbursements		$(124,005.49)	$(130,299.25)
Administrative expenses			
1/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH DECEMBER MONTH END	(693.88)	(693.89)
2/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JANUARY MONTH END	(701.93)	(701.94)
3/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH FEBRUARY MONTH END	(717.99)	(717.99)
4/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH MARCH MONTH END	(730.75)	(730.76)

4611

Transaction detail continued

Date	Description	Income	Principal
5/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH APRIL MONTH END	$(721.10)	$(721.10)
6/14/04	ADMINISTRATIVE FEES COLLECTED THROUGH MAY MONTH END	(731.56)	(731.56)
7/7/04	FIDUCIARY TAX RETURN PREP COLLECTED 2003 FORMS 1041/2	(1,060.00)	
7/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JUNE MONTH END	(757.03)	(757.03)
8/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JULY MONTH END	(744.62)	(744.62)
9/13/04	ADMINISTRATIVE FEES COLLECTED THROUGH AUGUST MONTH END	(755.08)	(755.09)
10/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH SEPTEMBER MONTH END	(744.19)	(744.19)
11/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH OCTOBER MONTH END	(743.41)	(743.41)
12/13/04	ADMINISTRATIVE FEES COLLECTED THROUGH NOVEMBER MONTH END	(762.48)	(762.48)
Total administrative expenses		$(9,864.02)	$(8,804.06)
Total cash disbursements		**$(133,869.51)**	**$(139,103.31)**

4612

Transaction detail continued

Investment transactions

Purchases

Date	Description	Realized gain/(loss)	Income	Principal
	COMBINED PURCHASES FOR THE PERIOD 1/ 1/04 - 12/31/04 OF ONE GROUP PRIME MONEY MARKET FUND INVESTMENTS AT TAX COST: $277,263.74			$(277,263.74)
3/25/04	PURCHASED 250 SHARES OF PFIZER INC TRADE DATE 3/22/04 PURCHASED THROUGH CORRESPONDENT SERVICES CORP. PAID $7.50 BROKERAGE 250 SHARES AT $33.68 INVESTMENTS AT TAX COST: $8,427.50			(8,427.50)
3/25/04	PURCHASED 350 SHARES OF JOHNSON & JOHNSON TRADE DATE 3/22/04 PURCHASED THROUGH CORRESPONDENT SERVICES CORP. PAID $10.50 BROKERAGE 350 SHARES AT $49.78 INVESTMENTS AT TAX COST: $17,433.50			(17,433.50)
3/25/04	PURCHASED 750 SHARES OF UNITEDHEALTH GROUP INC TRADE DATE 3/22/04 PURCHASED THROUGH CORRESPONDENT SERVICES CORP. PAID $22.50 BROKERAGE 750 SHARES AT $63.275 INVESTMENTS AT TAX COST: $47,478.75			(47,478.75)

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
3/25/04	PURCHASED 1,000 SHARES OF CSX CORP TRADE DATE 3/22/04 PURCHASED THROUGH CORRESPONDENT SERVICES CORP. PAID $30.00 BROKERAGE 1,000 SHARES AT $29.39 INVESTMENTS AT TAX COST: $29,420.00			$(29,420.00)
3/25/04	PURCHASED 1,000 SHARES OF HOME DEPOT INC TRADE DATE 3/22/04 PURCHASED THROUGH CORRESPONDENT SERVICES CORP. PAID $30.00 BROKERAGE 1,000 SHARES AT $36.153 INVESTMENTS AT TAX COST: $36,183.00			(36,183.00)
4/5/04	PURCHASED 500 SHARES OF DOMINION RES INC VA NEW TRADE DATE 3/31/04 PURCHASED THROUGH CORRESPONDENT SERVICES CORP. PAID $15.00 BROKERAGE 500 SHARES AT $64.074 INVESTMENTS AT TAX COST: $32,052.00			(32,052.00)

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
6/17/04	PURCHASED 500 SHARES OF CHEVRONTEXACO CORP TRADE DATE 6/14/04 PURCHASED THROUGH SPEAR, LEEDS & KELLOGG PAID $15.00 BROKERAGE 500 SHARES AT $90.22 INVESTMENTS AT TAX COST: $45,125.00			$(45,125.00)
6/17/04	PURCHASED 175 SHARES OF AMGEN INC TRADE DATE 6/14/04 PURCHASED THROUGH SPEAR, LEEDS & KELLOGG PAID $5.25 BROKERAGE 175 SHARES AT $55.43 INVESTMENTS AT TAX COST: $9,705.50			(9,705.50)
6/17/04	PURCHASED 1,500 SHARES OF TEXAS INSTRS INC TRADE DATE 6/14/04 PURCHASED THROUGH SPEAR, LEEDS & KELLOGG PAID $45.00 BROKERAGE 1,500 SHARES AT $24.44 INVESTMENTS AT TAX COST: $36,705.00			(36,705.00)
6/17/04	PURCHASED 250 SHARES OF PFIZER INC TRADE DATE 6/14/04 PURCHASED THROUGH SPEAR, LEEDS & KELLOGG PAID $7.50 BROKERAGE 250 SHARES AT $35.04 INVESTMENTS AT TAX COST: $8,767.50			(8,767.50)

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
6/17/04	PURCHASED 300 SHARES OF CITIGROUP INC TRADE DATE 6/14/04 PURCHASED THROUGH SPEAR, LEEDS & KELLOGG PAID $9.00 BROKERAGE 300 SHARES AT $46.63333 INVESTMENTS AT TAX COST: $13,999.00			$(13,999.00)
6/17/04	PURCHASED 500 SHARES OF BEAR STEARNS COS INC TRADE DATE 6/14/04 PURCHASED THROUGH SPEAR, LEEDS & KELLOGG PAID $15.00 BROKERAGE 500 SHARES AT $80.418 INVESTMENTS AT TAX COST: $40,224.00			(40,224.00)
6/17/04	PURCHASED 1,500 SHARES OF HEWLETT PACKARD CO TRADE DATE 6/14/04 PURCHASED THROUGH SPEAR, LEEDS & KELLOGG PAID $45.00 BROKERAGE 1,500 SHARES AT $21.498 INVESTMENTS AT TAX COST: $32,292.00			(32,292.00)
Total purchases			$0.00	$(635,076.49)
Sales and maturities				
	COMBINED SALES FOR THE PERIOD 1/ 1/04 - 12/31/04 OF ONE GROUP PRIME MONEY MARKET FUND INVESTMENTS AT TAX COST: $-280,432.95			280,432.95

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
1/13/04	SOLD 0.48 SHARES OF PIPER JAFFRAY COS TRADE DATE 1/13/04 SOLD THROUGH CASH IN LIEU OF FRACTIONAL SH CASH IN LIEU OF FRACTIONAL SHARE INVESTMENTS AT TAX COST: $-1.77	$18.61		$20.38
3/25/04	SOLD 448 SHARES OF ELECTRONIC DATA SYS CORP NEW TRADE DATE 3/22/04 SOLD THROUGH CORRESPONDENT SERVICES CORP. PAID $13.44 BROKERAGE PAID $0.34 SEC FEE 448 SHARES AT $19.09 INVESTMENTS AT TAX COST: $-4,460.00	4,058.54		8,538.54
3/25/04	SOLD 36 SHARES OF PIPER JAFFRAY COS TRADE DATE 3/22/04 SOLD THROUGH CORRESPONDENT SERVICES CORP. PAID $1.08 BROKERAGE PAID $0.08 SEC FEE 36 SHARES AT $51.65 INVESTMENTS AT TAX COST: $-133.09	1,725.15		1,858.24

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
3/25/04	SOLD 105 SHARES OF BURLINGTON NORTHN SANTA FE CORP TRADE DATE 3/22/04 SOLD THROUGH CORRESPONDENT SERVICES CORP. PAID $3.15 BROKERAGE PAID $0.13 SEC FEE 105 SHARES AT $30.20 INVESTMENTS AT TAX COST: $-506.62	$2,661.10		$3,167.72
3/25/04	SOLD 2,640 SHARES OF KIMBERLY CLARK CORP TRADE DATE 3/22/04 SOLD THROUGH CORRESPONDENT SERVICES CORP. PAID $79.20 BROKERAGE PAID $6.24 SEC FEE 2,640 SHARES AT $60.5803 INVESTMENTS AT TAX COST: $-36,442.89	123,403.67		159,846.56
3/25/04	SOLD 1,400 SHARES OF MICROCHIP TECHNOLOGY INC TRADE DATE 3/22/04 SOLD THROUGH CORRESPONDENT SERVICES CORP. PAID $42.00 BROKERAGE PAID $1.44 SEC FEE 1,400 SHARES AT $26.21288 INVESTMENTS AT TAX COST: $-45,710.00	(9,055.44)		36,654.56

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
3/25/04	SOLD 3,507.014 SHARES OF ONE GROUP ULTRA SHORT-TERM BOND FUND TRADE DATE 3/24/04 3,507.014 SHARES AT $9.98 INVESTMENTS AT TAX COST: $-34,873.29	$126.71		$35,000.00
5/25/04	SOLD 2,704.295 SHARES OF ONE GROUP ULTRA SHORT-TERM BOND FUND TRADE DATE 5/24/04 2,704.295 SHARES AT $9.89 INVESTMENTS AT TAX COST: $-26,880.69	(135.21)		26,745.48
6/17/04	SOLD 1,200 SHARES OF MICROSOFT CORP TRADE DATE 6/14/04 SOLD THROUGH SPEAR, LEEDS & KELLOGG PAID $36.00 BROKERAGE PAID $0.75 SEC FEE 1,200 SHARES AT $26.70 INVESTMENTS AT TAX COST: $-33,802.00	(1,798.75)		32,003.25
6/17/04	SOLD 101 SHARES OF ANADARKO PETE CORP TRADE DATE 6/14/04 SOLD THROUGH SPEAR, LEEDS & KELLOGG PAID $3.03 BROKERAGE PAID $0.14 SEC FEE 101 SHARES AT $56.1299 INVESTMENTS AT TAX COST: $-2,489.99	3,175.96		5,665.95

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
6/17/04	SOLD 2,500 SHARES OF KIMBERLY CLARK CORP TRADE DATE 6/14/04 SOLD THROUGH SPEAR, LEEDS & KELLOGG PAID $75.00 BROKERAGE PAID $3.83 SEC FEE 2,500 SHARES AT $65.3248 INVESTMENTS AT TAX COST: $-34,510.31	$128,722.86		$163,233.17
6/17/04	SOLD 650 SHARES OF AMERISOURCEBERGEN CORP TRADE DATE 6/14/04 SOLD THROUGH SPEAR, LEEDS & KELLOGG PAID $19.50 BROKERAGE PAID $0.92 SEC FEE 650 SHARES AT $60.05346 INVESTMENTS AT TAX COST: $-41,340.00	(2,325.67)		39,014.33
7/9/04	SOLD 0.48 SHARES OF J P MORGAN CHASE & CO TRADE DATE 7/9/04 SOLD THROUGH CASH IN LIEU OF FRACTIONAL SH CASH IN LIEU OF FRACTIONAL SHARE INVESTMENTS AT TAX COST: $-3.78	14.09		17.87

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
12/17/04	SOLD 0.5454 SHARES OF NEENAH PAPER INC TRADE DATE 12/17/04 SOLD THROUGH CASH IN LIEU OF FRACTIONAL SH CASH IN LIEU OF FRACTIONAL SHARE INVESTMENTS AT TAX COST: $-3.98	$12.73		$16.71
Total sales and maturities			$0.00	$792,215.71
Total investment transactions			**$0.00**	**$157,139.22**

Other investment transactions (non-cash)

Date	Description	Income	Principal
1/2/04	SPIN OFF RECEIVED 36.48 SHARES DISTRIBUTION AT 0.01 SHARES OF PIPER JAFFRAY COS FOR EACH SHARE OF US BANCORP DEL NEW DUE 12/31/03 MARKET VALUE OF $1,516.47 SPIN-OFF FROM US BANCORP DEL NEW CUSIP: 902973304		
1/5/04	STOCK SPLIT 2 FOR 1 STOCK SPLIT ON JOHNSON CTLS INC DUE 1/2/04 400 ADDITIONAL SHARES RECEIVED		

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Transaction detail continued

Date	Description	Income	Principal
1/6/04	SPIN OFF FEDERAL COST BASIS OF PIPER JAFFRAY COS ADJUSTED BY $134.86 OLD: $0.00 /NEW $134.86 SPIN-OFF TO PIPER JAFFRAY COS COM/CUSIP: 724078100 INVESTMENTS AT TAX COST: $134.86		
1/6/04	SPIN OFF STATE COST BASIS OF PIPER JAFFRAY COS ADJUSTED BY $134.86 OLD: $0.00 /NEW $134.86 SPIN-OFF TO PIPER JAFFRAY COS COM/CUSIP: 724078100		
1/6/04	SPIN OFF FEDERAL COST BASIS OF US BANCORP DEL NEW ADJUSTED BY $-134.86 OLD: $9,450.00 /NEW $9,315.14 SPIN-OFF TO PIPER JAFFRAY COS COM/CUSIP: 724078100 INVESTMENTS AT TAX COST: $-134.86		
1/6/04	SPIN OFF STATE COST BASIS OF US BANCORP DEL NEW ADJUSTED BY $-134.86 OLD: $9,450.00 /NEW $9,315.14 SPIN-OFF TO PIPER JAFFRAY COS COM/CUSIP: 724078100		

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Transaction detail continued

Date	Description	Income	Principal
7/1/04	MANDATORY STOCK MERGER DELIVERED 2,039 SHARES OF BANK ONE CORP EFFECTIVE DATE 07/01/04 MARKET VALUE OF $103,989.00 MANDATORY STOCK MERGER TO J P MORGAN CHASE & CO CUSIP: 46625H100 INVESTMENTS AT TAX COST: $-16,819.56		
7/1/04	MANDATORY STOCK MERGER RECEIVED 2,691.48 SHARES OF J.P MORGAN CHASE & CO EFFECTIVE DATE 07/01/04 DISTRIBUTION 07/01/04 1.32 SHARES FOR EACH SHARE HELD OF BANK ONE CORP MARKET VALUE OF $104,348.68 MANDATORY STOCK MERGER FROM BANK ONE CORP CUSIP: 06423A103 INVESTMENTS AT TAX COST: $16,819.56		
8/30/04	STOCK SPLIT 2 FOR 1 STOCK SPLIT ON BANK OF AMERICA CORP DUE 8/27/04 800 ADDITIONAL SHARES RECEIVED		
9/13/04	STOCK SPLIT 2 FOR 1 STOCK SPLIT ON CHEVRONTEXACO CORP DUE 9/10/04 500 ADDITIONAL SHARES RECEIVED		

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Transaction detail continued

Date	Description	Income	Principal
12/2/04	SPIN OFF RECEIVED 954.5454 SHARES DISTRIBUTION AT 0.03030303 SHARES OF NEENAH PAPER INC FOR EACH SHARE OF KIMBERLY CLARK CORP DUE 11/30/04 MARKET VALUE OF $0.00 SPIN-OFF FROM KIMBERLY CLARK CORP CUSIP: 494368103		
12/6/04	SPIN OFF FEDERAL COST BASIS OF NEENAH PAPER INC ADJUSTED BY $6,968.15 OLD: $0.00 /NEW $6,968.15 SPIN-OFF TO NEENAH PAPER INC/ CUSIP: 640079109 INVESTMENTS AT TAX COST: $6,968.15		
12/6/04	SPIN OFF STATE COST BASIS OF NEENAH PAPER INC ADJUSTED BY $6,968.15 OLD: $0.00 /NEW $6,968.15 SPIN-OFF TO NEENAH PAPER INC/ CUSIP: 640079109		

Transaction detail continued

Date	Description	Income	Principal
12/6/04	SPIN OFF FEDERAL COST BASIS OF KIMBERLY CLARK CORP ADJUSTED BY $-6,968.15 OLD: $434,829.88 /NEW $427,861.73 SPIN-OFF TO NEENAH PAPER INC/ CUSIP: 640079109 INVESTMENTS AT TAX COST: $-6,968.15		
12/6/04	SPIN OFF STATE COST BASIS OF KIMBERLY CLARK CORP ADJUSTED BY $-6,968.15 OLD: $434,829.88 /NEW $427,861.73 SPIN-OFF TO NEENAH PAPER INC/ CUSIP: 640079109		
Total other investment transactions (non-cash)		**$0.00**	**$0.00**
		Income	*Principal*
Ending cash balance 12/31/04		$(51,103.29)	$51,103.29

No pending trades.

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Although market values and prices for publicly-traded securities have been obtained from sources or third parties Bank One believes to be reliable, Bank One does not guarantee their accuracy. Certain assets may not be held by Bank One,and their reporting is at the request and for the convenience of the account owner. Certain assets, including, but not limited to, closely held, non-publicly-traded and infrequently traded securities, derivatives, partnership interests, tangible assets, and life insurance policy cash values cannot be readily priced. The valuation, pricing and/or transaction information is not independently verified by Bank One, is reflected as of the last date provided to Bank One and may not be current. Such information may not be determined by Bank One and may not have been provided to us by third parties who are not independent of the issuer or manager. Certain assets may be carried at cost.

This statement is not an official document for income tax reporting purposes.

When reviewing your Bond quality table, the percentages are rounded to zero when the percentage for a rating category is less than one percent.

When reviewing your Holdings detail, the market value listed for each asset may not equal quantity multiplied by share price due to rounding. The Market value column will always provide the most accurate figure.

Market values noted in the Market reconciliation and Transaction detail are as of the end of the statement period. The market value on the date of the transaction may be different.

Please be aware that the information shown in the Realized gain/(loss) column (found in the Transaction detail section of your statement) is based on TAX COST, even though the assets on your statement may be carried at Book value. Please contact your Advisor if you have questions regarding this information or any part of your statement.

Bank One or its affiliates may receive and accept from time to time 12B-1 fees, shareholder servicing fees, sub-transfer agency fees, network reimbursement fees, or other fees from unaffiliated mutual funds as described in the prospectus for the fund with respect to eligible accounts. Bank One has taken steps to avoid receiving fees with respect to ineligible accounts. If Bank One inadvertently receives any such fees for ineligible accounts, such fees will be returned to the fund's distributors or other payor.

Life Insurance values are shown at cash surrender value most recently reported by you or the Insurance Company, except where the value shown is $1.00. If the value is $1.00, we have not received a cash surrender value.

FLORIDA CLIENTS, please note that an action for breach of trust based on matters disclosed in a trust accounting or other written report of the Trustee may be subject to a 6-month statute of limitations from the receipt of the trust accounting or other written report. Questions, please consult your attorney. (FL ST sec. 737.307)

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BANK ONE.

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Annual Account Statement

F JAMES SENSENBRENNER III 1993 TRUST
Account number 9572131210
January 1, 2004 - December 31, 2004

BANK ONE TRUST COMPANY, N.A.
111 E WISCONSIN AVE,12TH FLOOR
MILWAUKEE, WI 53202

www.bankone.com

Your Advisor is:
LYNN E PAULL
(414) 977-2027 or (800) 926-4556

Thank you for the opportunity to serve your financial needs. We appreciate your confidence in us.

Please remember to check the Bulletin board (located at the back of your statement) for important messages from Bank One.

Don't hesitate to contact your advisor if you have any questions, comments or concerns.

05038 02332
F JAMES SENSENBRENNER JR
609 FORT WILLIAMS PKWY
ALEXANDRIA VA 22304-1813

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BANK ONE.

Holdings summary

	Value on December 31, 2004	Value on December 31, 2003	Change in value
Cash equivalents	$10,859.31		
Equities	331,479.14		
Fixed income	14,202.85		
Other	0.00		
Total holdings	$356,541.30	$321,690.82	$34,850.48
Accruals (income earned but not yet received)	$1,666.69		
Total holdings with accruals	$358,207.99		

Income summary

Income	Statement period	January 1 to December 31
Dividends (domestic/foreign/mutual fund income)	$2,295.84	$2,295.84
Interest (taxable/non-taxable)	46.73	46.73
Other income	0.00	0.00
Total income	$2,342.57	$2,342.57
Realized gain/(loss)		
	$4,602.95	$4,602.95

The income summary includes taxable and tax-exempt income for both principal and income beneficiaries, please refer to the Transaction detail for an income breakdown. These amounts represent approximate income and gain/(loss) amounts and should not be used for final Internal Revenue Service reporting.

Market reconciliation

	Statement period	January 1 to December 31
Beginning market value	$321,690.82	$321,690.82
Receipts	715.76	715.76
Disbursements	(3,479.42)	(3,479.42)
Income	2,342.57	2,342.57
Capital gains distributions	2,699.13	2,699.13
Change in asset market value	32,572.44	32,572.44
Ending market value	$356,541.30	$356,541.30

The Market reconciliation provides a summary of all activity in the account. The Receipts and Disbursements categories may include Non-Cash Transactions such as transfers within the account, name change transactions, asset receipts and distributions, and stock split transactions. The Transaction detail section provides an itemized list of all transactions. The Transaction summary provides a summary of cash receipt and disbursement transactions.

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Transaction summary

	Income	Principal
Beginning cash balance 1/1/04	$0.00	$0.00
Cash receipts		
Dividends (domestic/foreign/mutual fund income)	$2,295.84	$0.00
Interest (taxable/non-taxable)	46.73	0.00
Other cash receipts	0.00	3,414.89
Total cash receipts	$2,342.57	$3,414.89
Cash disbursements		
Cash disbursements	$(715.76)	$0.00
Administrative expenses	(1,626.81)	(1,136.85)
Total cash disbursements	$(2,342.57)	$(1,136.85)
Investment transactions		
Purchases	$0.00	$(30,423.08)
Sales and maturities	0.00	28,145.04
Total investment transactions	$0.00	$(2,278.04)
Ending cash balance 12/31/04	$0.00	$0.00

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Only the Asset allocation analysis includes mutual fund holdings. The Bond quality and maturity analyses (if applicable) are displayed excluding mutual funds.

Investment objective: Growth

This strategy seeks to provide long-term capital appreciation and overall returns that are competitive with the general equity market by investing at least 80% of its assets in equity securities. Current income is a secondary consideration. Principal volatility is expected to be relatively high.

Asset allocation

3.0% - **Cash equivalents**

93.0% - **Equities**
93.0% - *Mutual funds*

4.0% - **Fixed income**
4.0% - *Mutual funds*

The Asset allocation may not be exactly as described in the Investment objective due to Other Asset holdings.

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BANK ONE.

Holdings detail

Cash equivalents

Very liquid assets Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
ONE GROUP PRIME MONEY MARKET FUND	10,859.310	1.000	$10,859.31	$10,859.31	$0.00	1.73%	$187.87
Total cash equivalents			$10,859.31	$10,859.31	$0.00		$187.87

Equities

Mutual funds Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
ONE GROUP DIVERSIFIED EQUITY FUND	4,275.651	12.260	$52,419.48	$48,820.56	$3,598.92	0.64%	$333.50
ONE GROUP DIVERSIFIED INTERNATL FD	707.404	15.850	11,212.35	10,966.12	246.23	0.72%	80.64
ONE GROUP INTERNATIONAL EQTY INDX FD	1,618.601	20.030	32,420.58	23,651.93	8,768.65	0.93%	302.68
ONE GROUP LARGE CAP GROWTH FUND	3,465.236	15.190	52,636.93	46,864.44	5,772.49	0.00%	0.00
ONE GROUP LARGE CAP VALUE FUND	3,671.217	15.850	58,188.79	47,411.34	10,777.45	1.12%	649.81
ONE GROUP MARKET NEUTRAL FD	2,148.052	10.580	22,726.39	22,037.59	688.80	0.00%	0.00
ONE GROUP MID CAP GROWTH FUND	1,663.039	24.050	39,996.09	28,026.37	11,969.72	0.00%	0.00
ONE GROUP MID CAP VALUE FUND	1,925.160	18.160	34,960.91	23,505.43	11,455.48	0.61%	211.77
ONE GROUP SMALL CAP GROWTH FUND	895.912	12.990	11,637.90	8,077.19	3,560.71	0.00%	0.00

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Holdings detail continued

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
ONE GROUP SMALL CAP VALUE FUND	605.377	25.240	$15,279.72	$8,395.72	$6,884.00	0.28%	$43.59
Total equities			**$331,479.14**	**$267,756.69**	**$63,722.45**		**$1,621.99**

Fixed income

Mutual funds

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Yield to maturity	Estimated annual income
ONE GROUP BOND FUND (WOBDX)	572.991	10.920	$6,257.06	$5,796.16	$460.90	4.93%		$308.27
ONE GROUP GOVERNMENT BOND FUND (HLGAX)	246.054	10.350	2,546.66	2,251.42	295.24	4.77%		121.55
ONE GROUP INCOME BOND FUND (HLIPX)	679.136	7.950	5,399.13	5,094.16	304.97	0.44%		23.77
Total fixed income			**$14,202.85**	**$13,141.74**	**$1,061.11**			**$453.59**
Total holdings			**$356,541.30**	**$291,757.74**	**$64,783.56**			**$2,263.45**
Accruals (income earned but not yet received)			$1,666.69					
Total holdings with accruals			**$358,207.99**					

Assets identified with an asterisk (*) at the beginning of the asset name are held in the invested Income Portfolio.

Transaction detail

			Income	Principal
Beginning cash balance 1/1/04			$0.00	$0.00
Date	Description	Realized gain/(loss)	Income	Principal
	COMBINED PURCHASES FOR THE PERIOD 1/ 1/04 - 12/31/04 OF ONE GROUP PRIME MONEY MARKET FUND INVESTMENTS AT TAX COST: $8,406.86			$(8,406.86)
	COMBINED SALES FOR THE PERIOD 1/ 1/04 - 12/31/04 OF ONE GROUP PRIME MONEY MARKET FUND INVESTMENTS AT TAX COST: $-2,763.66			2,763.66
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 12/1/03 TO 12/31/03		$20.70	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.023697/SHARE ON 3,900.998 SHARES DUE 1/2/04		92.44	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED INTERNAT'L FD $0.114372/SHARE ON 509.611 SHARES DUE 1/2/04		58.29	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 12/1/03 TO 12/31/03		10.58	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 12/1/03 TO 12/31/03		22.41	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERNATIONAL EQTY INDX FD $0.186693/SHARE ON 1,794.787 SHARES DUE 1/2/04		335.07	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.045275/SHARE ON 3,524.88 SHARES DUE 1/2/04		$159.59	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.025871/SHARE ON 2,623.219 SHARES DUE 1/2/04		67.87	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.020931/SHARE ON 605.377 SHARES DUE 1/2/04		12.67	
1/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 12/1/03 TO 12/31/03		2.94	
1/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH DECEMBER MONTH END		(94.70)	$(94.71)
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 1/1/04 TO 1/31/04		20.23	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 1/1/04 TO 1/31/04		10.09	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 1/1/04 TO 1/31/04		21.05	
2/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 1/1/04 TO 1/31/04		3.21	
2/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JANUARY MONTH END		(94.71)	(94.71)

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 2/1/04 TO 2/29/04		$20.23	
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 2/1/04 TO 2/29/04		9.84	
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 2/1/04 TO 2/29/04		21.05	
3/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 2/1/04 TO 2/29/04		2.91	
3/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH FEBRUARY MONTH END		(94.71)	$(94.72)
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 3/1/04 TO 3/31/04		21.65	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.015892/SHARE ON 3,900.998 SHARES DUE 4/1/04		61.99	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 3/1/04 TO 3/31/04		9.84	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 3/1/04 TO 3/31/04		20.37	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.040604/SHARE ON 3,524.88 SHARES DUE 4/1/04		$143.12	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.015312/SHARE ON 2,623.219 SHARES DUE 4/1/04		40.17	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.021058/SHARE ON 605.377 SHARES DUE 4/1/04		12.75	
4/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 3/1/04 TO 3/31/04		3.02	
4/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH MARCH MONTH END		(94.71)	$(94.72)
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 4/1/04 TO 4/30/04		22.59	
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 4/1/04 TO 4/30/04		10.58	
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 4/1/04 TO 4/30/04		21.05	
5/3/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 4/1/04 TO 4/30/04		3.04	
5/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH APRIL MONTH END		(94.70)	(94.70)

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 5/1/04 TO 5/31/04		$22.12	
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 5/1/04 TO 5/31/04		10.33	
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 5/1/04 TO 5/31/04		21.05	
6/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 5/1/04 TO 5/31/04		3.17	
6/10/04	FIDUCIARY TAX RETURN PREP COLLECTED 2003 FORMS 1041/ 2		(490.00)	
6/14/04	ADMINISTRATIVE FEES COLLECTED THROUGH MAY MONTH END		(94.71)	$(94.72)
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 6/1/04 TO 6/30/04		22.12	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.019605/SHARE ON 3,900.998 SHARES DUE 7/1/04		76.48	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 6/1/04 TO 6/30/04		10.33	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 6/1/04 TO 6/30/04		21.05	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.045164/SHARE ON 3,524.88 SHARES DUE 7/1/04		$159.20	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.040723/SHARE ON 2,623.219 SHARES DUE 7/1/04		106.83	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.003055/SHARE ON 605.377 SHARES DUE 7/1/04		1.85	
7/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 6/1/04 TO 6/30/04		3.03	
7/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JUNE MONTH END		(94.77)	$(94.77)
7/20/04	PURCHASED 665.096 SHARES OF ONE GROUP MARKET NEUTRAL FD TRADE DATE 7/19/04 665.096 SHARES AT $10.61 INVESTMENTS AT TAX COST: $7,056.67			(7,056.67)
7/20/04	PURCHASED 341.603 SHARES OF ONE GROUP LARGE CAP GROWTH FUND TRADE DATE 7/19/04 341.603 SHARES AT $13.94 INVESTMENTS AT TAX COST: $4,761.95			(4,761.95)
7/20/04	PURCHASED 374.653 SHARES OF ONE GROUP DIVERSIFIED EQUITY FUND TRADE DATE 7/19/04 374.653 SHARES AT $11.38 INVESTMENTS AT TAX COST: $4,263.55			(4,263.55)

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
7/20/04	PURCHASED 197.793 SHARES OF ONE GROUP DIVERSIFIED INTERNAT'L FD TRADE DATE 7/19/04 197.793 SHARES AT $13.84 INVESTMENTS AT TAX COST: $2,737.45			$(2,737.45)
7/20/04	PURCHASED 146.337 SHARES OF ONE GROUP LARGE CAP VALUE FUND TRADE DATE 7/19/04 146.337 SHARES AT $14.20 INVESTMENTS AT TAX COST: $2,077.98			(2,077.98)
7/20/04	PURCHASED 102.438 SHARES OF ONE GROUP BOND FUND TRADE DATE 7/19/04 102.438 SHARES AT $10.92 INVESTMENTS AT TAX COST: $1,118.62			(1,118.62)
7/20/04	SOLD 698.059 SHARES OF ONE GROUP MID CAP VALUE FUND TRADE DATE 7/19/04 698.059 SHARES AT $16.89 INVESTMENTS AT TAX COST: $-8,871.17	$2,919.04		11,790.21
7/20/04	SOLD 484.186 SHARES OF ONE GROUP MID CAP GROWTH FUND TRADE DATE 7/19/04 484.186 SHARES AT $21.12 INVESTMENTS AT TAX COST: $-11,220.88	(994.87)		10,226.01
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 7/1/04 TO 7/31/04		$26.36	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 7/1/04 TO 7/31/04		$10.09	
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 7/1/04 TO 7/31/04		20.37	
8/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 7/1/04 TO 7/31/04		3.80	
8/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JULY MONTH END		(94.76)	$(94.76)
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 8/1/04 TO 8/31/04		25.78	
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 8/1/04 TO 8/31/04		10.09	
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 8/1/04 TO 8/31/04		21.73	
9/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 8/1/04 TO 8/31/04		4.39	
9/13/04	ADMINISTRATIVE FEES COLLECTED THROUGH AUGUST MONTH END		(94.76)	(94.76)
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 9/1/04 TO 9/30/04		24.64	

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.018352/SHARE ON 4,275.651 SHARES DUE 10/1/04		$78.47	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 9/1/04 TO 9/30/04		9.84	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 9/1/04 TO 9/30/04		20.37	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.046306/SHARE ON 3,671.217 SHARES DUE 10/1/04		170.00	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.02841/SHARE ON 1,925.16 SHARES DUE 10/1/04		54.69	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.026621/SHARE ON 605.377 SHARES DUE 10/1/04		16.12	
10/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 9/1/04 TO 9/30/04		4.69	
10/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH SEPTEMBER MONTH END		(94.76)	$(94.76)
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 10/1/04 TO 10/31/04		24.07	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 10/1/04 TO 10/31/04		$9.60	
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 10/1/04 TO 10/31/04		19.69	
11/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 10/1/04 TO 10/31/04		5.50	
11/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH OCTOBER MONTH END		(94.76)	$(94.76)
11/23/04	SOLD 176.186 SHARES OF ONE GROUP INTERNATIONAL EQTY INDX FD TRADE DATE 11/22/04 176.186 SHARES AT $19.10 INVESTMENTS AT TAX COST: $-3,385.51	$(20.35)		3,365.16
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 11/1/04 TO 11/30/04		25.21	
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 11/1/04 TO 11/30/04		10.09	
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 11/1/04 TO 11/30/04		21.05	
12/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 11/1/04 TO 11/30/04		7.03	

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
12/13/04	ADMINISTRATIVE FEES COLLECTED THROUGH NOVEMBER MONTH END		$(94.76)	$(94.76)
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP MARKET NEUTRAL FD $0.0076/SHARE ON 2,148.052 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $16.30 ON FEDERAL COST LT CAPITAL GAIN OF $16.30 ON STATE COST	$16.30		16.30
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP SMALL CAP GROWTH FUND $0.058/SHARE ON 895.912 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $51.97 ON FEDERAL COST LT CAPITAL GAIN OF $51.97 ON STATE COST	51.97		51.97
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP MID CAP VALUE FUND $0.5507/SHARE ON 1,925.16 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $1,060.22 ON FEDERAL COST LT CAPITAL GAIN OF $1,060.22 ON STATE COST	1,060.22		1,060.22
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP SMALL CAP VALUE FUND $2.1798/SHARE ON 605.377 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $1,319.58 ON FEDERAL COST LT CAPITAL GAIN OF $1,319.58 ON STATE COST	1,319.58		1,319.58

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
12/17/04	RECEIVE ST CAPITAL GAINS DISTRIBUTION ON ONE GROUP MARKET NEUTRAL FD $0.1169/SHARE ON 2,148.052 SHARES DUE 12/16/04 ST CAPITAL GAIN OF $251.06 ON FEDERAL COST ST CAPITAL GAIN OF $251.06 ON STATE COST	$251.06		$251.06
12/31/04	CASH DISBURSEMENT TRANSFER TO PRINCIPAL		$(715.76)	
12/31/04	CASH RECEIPT TRANSFER FROM INCOME			715.76
			Income	Principal
Ending cash balance 12/31/04			$0.00	$0.00

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Pending trades

Pending purchases

Trade date	Description	Amount
12/31/04	ONE GROUP LARGE CAP GROWTH FUND 855.826 SHARES AT $15.19/SHARE, ANTICIPATED SETTLEMENT DATE 01/03/2005.	$(13,000.00)
12/31/04	ONE GROUP INTERNATIONAL EQTY INDX FD 499.251 SHARES AT $20.03/SHARE, ANTICIPATED SETTLEMENT DATE 01/03/2005.	(10,000.00)
12/31/04	ONE GROUP INCOME BOND FUND (HLIPX) 313.283 UNITS AT $7.98/UNIT, ANTICIPATED SETTLEMENT DATE 01/03/2005.	(2,500.00)
12/31/04	ONE GROUP MID CAP GROWTH FUND 83.16 SHARES AT $24.05/SHARE, ANTICIPATED SETTLEMENT DATE 01/03/2005.	(2,000.00)
12/31/04	ONE GROUP MID CAP VALUE FUND 440.529 SHARES AT $18.16/SHARE, ANTICIPATED SETTLEMENT DATE 01/03/2005.	(8,000.00)

Pending trades continued

Trade date	Description	Amount
12/31/04	ONE GROUP LARGE CAP VALUE FUND 441.64 SHARES AT $15.85/SHARE, ANTICIPATED SETTLEMENT DATE 01/03/2005.	$(7,000.00)
Total pending purchases		$(42,500.00)
Pending sales		
12/31/04	ONE GROUP GOVERNMENT BOND FUND (HLGAX) 246.054 UNITS AT $10.35/UNIT, ANTICIPATED SETTLEMENT DATE 01/03/2005.	$2,546.66
12/31/04	ONE GROUP DIVERSIFIED INTERNAT'L FD 707.404 SHARES AT $15.85/SHARE, ANTICIPATED SETTLEMENT DATE 01/03/2005.	11,212.35
12/31/04	ONE GROUP MARKET NEUTRAL FD 2,148.052 SHARES AT $10.58/SHARE, ANTICIPATED SETTLEMENT DATE 01/03/2005.	22,726.39
Total pending sales		$36,485.40

The settlement amount(s) appearing in the Pending trades section is net of commissions, therefore shares multiplied by price may not equal the settlement amount.

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Although market values and prices for publicly-traded securities have been obtained from sources or third parties Bank One believes to be reliable, Bank One does not guarantee their accuracy. Certain assets may not be held by Bank One,and their reporting is at the request and for the convenience of the account owner. Certain assets, including, but not limited to, closely held, non-publicly-traded and infrequently traded securities, derivatives, partnership interests, tangible assets, and life insurance policy cash values cannot be readily priced. The valuation, pricing and/or transaction information is not independently verified by Bank One, is reflected as of the last date provided to Bank One and may not be current. Such information may not be determined by Bank One and may not have been provided to us by third parties who are not independent of the issuer or manager. Certain assets may be carried at cost.

This statement is not an official document for income tax reporting purposes.

When reviewing your Bond quality table, the percentages are rounded to zero when the percentage for a rating category is less than one percent.

When reviewing your Holdings detail, the market value listed for each asset may not equal quantity multiplied by share price due to rounding. The Market value column will always provide the most accurate figure.

Market values noted in the Market reconciliation and Transaction detail are as of the end of the statement period. The market value on the date of the transaction may be different.

Please be aware that the information shown in the Realized gain/(loss) column (found in the Transaction detail section of your statement) is based on TAX COST, even though the assets on your statement may be carried at Book value. Please contact your Advisor if you have questions regarding this information or any part of your statement.

Bank One or its affiliates may receive and accept from time to time 12B-1 fees, shareholder servicing fees, sub-transfer agency fees, network reimbursement fees, or other fees from unaffiliated mutual funds as described in the prospectus for the fund with respect to eligible accounts. Bank One has taken steps to avoid receiving fees with respect to ineligible accounts. If Bank One inadvertently receives any such fees for ineligible accounts, such fees will be returned to the fund's distributors or other payor.

Life insurance values are shown at cash surrender value most recently reported by you or the Insurance Company, except where the value shown is $1.00. If the value is $1.00, we have not received a cash surrender value.

FLORIDA CLIENTS, please note that an action for breach of trust based on matters disclosed in a trust accounting or other written report of the Trustee may be subject to a 6-month statute of limitations from the receipt of the trust accounting or other written report. Questions, please consult your attorney. (FL ST sec. 737.307)

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Annual Account Statement

F JAMES SENSENBRENNER III TR
Account number 9572031010
January 1, 2004 - December 31, 2004

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Thank you for the opportunity to serve your financial needs. We appreciate your confidence in us.

Please remember to check the Bulletin board (located at the back of your statement) for important messages from Bank One.

Don't hesitate to contact your advisor if you have any questions, comments or concerns.

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Holdings summary

	Value on December 31, 2004	Value on December 31, 2003	Change in value
Cash equivalents	$1,181.82		
Equities	140,158.34		
Fixed income	6,339.81		
Other	0.00		
Total holdings	$147,679.97	$133,521.07	$14,158.90
Accruals (income earned but not yet received)	$727.50		
Total holdings with accruals	$148,407.47		

Income summary

Income	Statement period	January 1 to December 31
Dividends (domestic/foreign/mutual fund income)	$962.36	$962.36
Interest (taxable/non-taxable)	19.15	19.15
Other income	0.00	0.00
Total income	$981.51	$981.51
Realized gain/(loss)		
	$3,452.60	$3,452.60

The Income summary includes taxable and tax-exempt income for both principal and income beneficiaries, please refer to the Transaction detail for an income breakdown. These amounts represent approximate income and gain/(loss) amounts and should not be used for final Internal Revenue Service reporting.

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Market reconciliation

	Statement period	January 1 to December 31
Beginning market value	$133,521.07	$133,521.07
Receipts	125.77	125.77
Disbursements	(1,558.63)	(1,558.63)
Income	981.51	981.51
Capital gains distributions	1,116.07	1,116.07
Change in asset market value	13,494.18	13,494.18
Ending market value	$147,679.97	$147,679.97

The Market reconciliation provides a summary of all activity in the account. The Receipts and Disbursements categories may include Non-Cash Transactions such as transfers within the account, name change transactions, asset receipts and distributions, and stock split transactions. The Transaction detail section provides an itemized list of all transactions. The Transaction summary provides a summary of cash receipt and disbursement transactions.

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Transaction summary

	Income	Principal
Beginning cash balance 1/1/04	$(105.69)	$105.69
Cash receipts		
Dividends (domestic/foreign/mutual fund income)	$962.36	$0.00
Interest (taxable/non-taxable)	19.15	0.00
Other cash receipts	105.69	1,136.15
Total cash receipts	$1,087.20	$1,136.15
Cash disbursements		
Cash disbursements	$(20.08)	$(105.69)
Administrative expenses	(961.43)	(471.43)
Total cash disbursements	$(981.51)	$(577.12)
Investment transactions		
Purchases	$0.00	$(25,994.73)
Sales and maturities	0.00	25,330.01
Total investment transactions	$0.00	$(664.72)
Ending cash balance 12/31/04	$0.00	$0.00

Only the Asset allocation analysis includes mutual fund holdings. The Bond quality and maturity analyses (if applicable) are displayed excluding mutual funds.

Investment objective: Growth

This strategy seeks to provide long-term capital appreciation and overall returns that are competitive with the general equity market by investing at least 80% of its assets in equity securities. Current income is a secondary consideration. Principal volatility is expected to be relatively high.

Asset allocation

- 0.8% - Cash equivalents
- 94.9% - Equities
  - 94.9% - *Mutual funds*
- 4.3% - Fixed Income
  - 4.3% - *Mutual funds*

The Asset allocation may not be exactly as described in the Investment objective due to Other Asset holdings.

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Holdings detail

Cash equivalents

Very liquid assets

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
ONE GROUP PRIME MONEY MARKET FUND	1,181.820	1.000	$1,181.82	$1,181.82	$0.00	1.73%	$20.45
Total cash equivalents			**$1,181.82**	**$1,181.82**	**$0.00**		**$20.45**

Equities

Mutual funds

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
ONE GROUP DIVERSIFIED EQUITY FUND	1,771.510	12.260	$21,718.71	$18,920.84	$2,797.87	0.64%	$138.18
ONE GROUP DIVERSIFIED INTERNAT'L FD	293.106	15.850	4,645.73	3,632.56	1,013.17	0.72%	33.41
ONE GROUP INTERNATIONAL EQTY INDX FD	670.656	20.030	13,433.24	9,070.16	4,363.08	0.93%	125.41
ONE GROUP LARGE CAP GROWTH FUND	1,786.868	15.190	27,142.52	23,029.24	4,113.28	0.00%	0.00
ONE GROUP LARGE CAP VALUE FUND	1,709.267	15.850	27,091.88	22,239.64	4,852.24	1.12%	302.54
ONE GROUP MID CAP GROWTH FUND	730.979	24.050	17,580.04	11,454.62	6,125.42	0.00%	0.00
ONE GROUP MID CAP VALUE FUND	982.300	18.160	17,475.37	12,408.83	5,066.54	0.61%	105.85
ONE GROUP SMALL CAP GROWTH FUND	371.842	12.990	4,830.23	3,375.22	1,455.01	0.00%	0.00

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Holdings detail continued

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
ONE GROUP SMALL CAP VALUE FUND	247.251	25.240	$6,240.62	$3,291.51	$2,949.11	0.28%	$17.80
Total equities			$140,158.34	$107,422.62	$32,735.72		$723.19

Fixed income

Mutual funds

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Yield to maturity	Estimated annual income
ONE GROUP BOND FUND (WOBDX)	229.121	10.920	$2,502.00	$2,309.47	$192.53	4.93%		$123.27
ONE GROUP INCOME BOND FUND (HLIPX)	482.743	7.950	3,837.81	3,736.58	101.23	0.44%		16.90
Total fixed income			$6,339.81	$6,046.05	$293.76			$140.17
Total holdings			$147,679.97	$114,650.49	$33,029.48			$883.81
Accruals (income earned but not yet received)			$727.50					
Total holdings with accruals			$148,407.47					

Assets identified with an asterisk (*) at the beginning of the asset name are held in the Invested Income Portfolio.

Transaction detail

			Income	Principal
Beginning cash balance 1/1/04			$(105.69)	$105.69
Date	**Description**	**Realized gain/(loss)**	**Income**	**Principal**
	COMBINED PURCHASES FOR THE PERIOD 1/ 1/04 - 12/31/04 OF ONE GROUP PRIME MONEY MARKET FUND INVESTMENTS AT TAX COST: $2,838.29			$(2,838.29)
	COMBINED SALES FOR THE PERIOD 1/ 1/04 - 12/31/04 OF ONE GROUP PRIME MONEY MARKET FUND INVESTMENTS AT TAX COST: $-3,497.99			3,497.99
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND . DIVIDEND FROM 12/1/03 TO 12/31/03		$10.08	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.023697/SHARE ON 1,619.071 SHARES DUE 1/2/04		38.37	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED INTERNAT'L FD $0.114372/SHARE ON 213.08 SHARES DUE 1/2/04		24.37	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 12/1/03 TO 12/31/03		4.40	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 12/1/03 TO 12/31/03		9.29	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERNATIONAL EQTY INDX FD $0.186693/SHARE ON 744.915 SHARES DUE 1/2/04		139.07	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.045275/SHARE ON 1,449.419 SHARES DUE 1/2/04		$65.62	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.025871/SHARE ON 1,088.689 SHARES DUE 1/2/04		28.17	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.020931/SHARE ON 255.655 SHARES DUE 1/2/04		5.35	
1/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 12/1/03 TO 12/31/03		1.04	
1/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH DECEMBER MONTH END		(39.31)	$(39.31)
1/14/04	CASH DISBURSEMENT TRANSFER TO INCOME			(105.69)
1/14/04	CASH RECEIPT TRANSFER FROM PRINCIPAL		105.69	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 1/1/04 TO 1/31/04		9.85	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 1/1/04 TO 1/31/04		4.20	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 1/1/04 TO 1/31/04		8.73	

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
2/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 1/1/04 TO 1/31/04		$1.15	
2/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JANUARY MONTH END		(39.31)	$(39.31)
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 2/1/04 TO 2/29/04		9.85	
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 2/1/04 TO 2/29/04		4.10	
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 2/1/04 TO 2/29/04		8.73	
3/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 2/1/04 TO 2/29/04		1.04	
3/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH FEBRUARY MONTH END		(39.31)	(39.31)
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 3/1/04 TO 3/31/04		10.54	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.015892/SHARE ON 1,619.071 SHARES DUE 4/1/04		25.73	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 3/1/04 TO 3/31/04		4.10	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 3/1/04 TO 3/31/04		$8.45	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.040604/SHARE ON 1,449.419 SHARES DUE 4/1/04		58.85	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.015312/SHARE ON 1,088.689 SHARES DUE 4/1/04		16.67	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.021058/SHARE ON 255.655 SHARES DUE 4/1/04		5.38	
4/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 3/1/04 TO 3/31/04		1.08	
4/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH MARCH MONTH END		(39.31)	$(39.31)
4/27/04	SOLD 32.659 SHARES OF ONE GROUP MID CAP GROWTH FUND TRADE DATE 4/26/04 32.659 SHARES AT $22.68 INVESTMENTS AT TAX COST: $-748.22	$(7.51)		740.71
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 4/1/04 TO 4/30/04		11.00	
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 4/1/04 TO 4/30/04		4.40	

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 4/1/04 TO 4/30/04		$8.73	
5/3/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 4/1/04 TO 4/30/04		1.15	
5/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH APRIL MONTH END		(39.32)	$(39.32)
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 5/1/04 TO 5/31/04		10.77	
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 5/1/04 TO 5/31/04		4.30	
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 5/1/04 TO 5/31/04		8.73	
6/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 5/1/04 TO 5/31/04		1.55	
6/10/04	FIDUCIARY TAX RETURN PREP COLLECTED 2003 FORMS 1041/2		(490.00)	
6/14/04	ADMINISTRATIVE FEES COLLECTED THROUGH MAY MONTH END		(39.31)	(39.31)
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 6/1/04 TO 6/30/04		10.77	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.019605/SHARE ON 1,619.071 SHARES DUE 7/1/04		$31.74	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 6/1/04 TO 6/30/04		4.30	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 6/1/04 TO 6/30/04		8.73	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.045164/SHARE ON 1,449.419 SHARES DUE 7/1/04		65.46	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.040723/SHARE ON 1,088.689 SHARES DUE 7/1/04		44.33	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.003055/SHARE ON 255.655 SHARES DUE 7/1/04		0.78	
7/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 6/1/04 TO 6/30/04		1.39	
7/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JUNE MONTH END		(39.26)	$(39.26)
7/20/04	PURCHASED 274.5 SHARES OF ONE GROUP MARKET NEUTRAL FD TRADE DATE 7/19/04 274.5 SHARES AT $10.61 INVESTMENTS AT TAX COST: $2,912.44			(2,912.44)

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
7/20/04	PURCHASED 141.034 SHARES OF ONE GROUP LARGE CAP GROWTH FUND TRADE DATE 7/19/04 141.034 SHARES AT $13.94 INVESTMENTS AT TAX COST: $1,966.02			$(1,966.02)
7/20/04	PURCHASED 152.439 SHARES OF ONE GROUP DIVERSIFIED EQUITY FUND TRADE DATE 7/19/04 152.439 SHARES AT $11.38 INVESTMENTS AT TAX COST: $1,734.76			(1,734.76)
7/20/04	PURCHASED 80.026 SHARES OF ONE GROUP DIVERSIFIED INTERNAT'L FD TRADE DATE 7/19/04 80.026 SHARES AT $13.84 INVESTMENTS AT TAX COST: $1,107.56			(1,107.56)
7/20/04	PURCHASED 71.642 SHARES OF ONE GROUP LARGE CAP VALUE FUND TRADE DATE 7/19/04 71.642 SHARES AT $14.20 INVESTMENTS AT TAX COST: $1,017.31			(1,017.31)
7/20/04	SOLD 291.043 SHARES OF ONE GROUP MID CAP VALUE FUND TRADE DATE 7/19/04 291.043 SHARES AT $16.89 INVESTMENTS AT TAX COST: $-3,681.78	$1,233.94		4,915.72

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
7/20/04	SOLD 171.394 SHARES OF ONE GROUP MID CAP GROWTH FUND TRADE DATE 7/19/04 171.394 SHARES AT $21.12 INVESTMENTS AT TAX COST: $-3,097.52	$522.32		$3,619.84
7/20/04	SOLD 8.404 SHARES OF ONE GROUP SMALL CAP VALUE FUND TRADE DATE 7/19/04 8.404 SHARES AT $24.10 INVESTMENTS AT TAX COST: $-165.89	36.64		202.53
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 7/1/04 TO 7/31/04		$10.54	
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 7/1/04 TO 7/31/04		4.20	
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 7/1/04 TO 7/31/04		8.45	
8/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 7/1/04 TO 7/31/04		1.68	
8/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JULY MONTH END		(39.26)	(39.26)
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 8/1/04 TO 8/31/04		10.31	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 8/1/04 TO 8/31/04		$4.20	
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 8/1/04 TO 8/31/04		9.01	
9/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 8/1/04 TO 8/31/04		1.94	
9/13/04	ADMINISTRATIVE FEES COLLECTED THROUGH AUGUST MONTH END		(39.26)	$(39.26)
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 9/1/04 TO 9/30/04		9.85	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.018352/SHARE ON 1,771.51 SHARES DUE 10/1/04		32.51	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 9/1/04 TO 9/30/04		4.10	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 9/1/04 TO 9/30/04		8.45	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.046306/SHARE ON 1,521.061 SHARES DUE 10/1/04		70.43	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.02841/SHARE ON 797.648 SHARES DUE 10/1/04		$22.66	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.026621/SHARE ON 247.251 SHARES DUE 10/1/04		6.58	
10/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 9/1/04 TO 9/30/04		2.08	
10/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH SEPTEMBER MONTH END		(39.26)	$(39.26)
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 10/1/04 TO 10/31/04		9.62	
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 10/1/04 TO 10/31/04		3.99	
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 10/1/04 TO 10/31/04		8.16	
11/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 10/1/04 TO 10/31/04		2.43	
11/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH OCTOBER MONTH END		(39.26)	(39.26)

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
11/23/04	PURCHASED 75.763 SHARES OF ONE GROUP INCOME BOND FUND TRADE DATE 11/22/04 75.763 SHARES AT $7.98 INVESTMENTS AT TAX COST: $604.59			$(604.59)
11/23/04	PURCHASED 44.156 SHARES OF ONE GROUP MARKET NEUTRAL FD TRADE DATE 11/22/04 44.156 SHARES AT $10.70 INVESTMENTS AT TAX COST: $472.47			(472.47)
11/23/04	PURCHASED 23.264 SHARES OF ONE GROUP LARGE CAP GROWTH FUND TRADE DATE 11/22/04 23.264 SHARES AT $14.67 INVESTMENTS AT TAX COST: $341.29			(341.29)
11/23/04	SOLD 74.259 SHARES OF ONE GROUP INTERNATIONAL EQTY INDX FD TRADE DATE 11/22/04 74.259 SHARES AT $19.10 INVESTMENTS AT TAX COST: $-1,269.59	$148.76		1,418.35
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 11/1/04 TO 11/30/04		$10.08	
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 11/1/04 TO 11/30/04		4.20	
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 11/1/04 TO 11/30/04		11.08	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
12/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 11/1/04 TO 11/30/04		$2.62	
12/13/04	ADMINISTRATIVE FEES COLLECTED THROUGH NOVEMBER MONTH END		(39.26)	$(39.26)
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP MARKET NEUTRAL FD $0.0076/SHARE ON 934.155 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $7.09 ON FEDERAL COST LT CAPITAL GAIN OF $7.09 ON STATE COST	$7.09		7.09
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP SMALL CAP GROWTH FUND $0.058/SHARE ON 371.842 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $21.57 ON FEDERAL COST LT CAPITAL GAIN OF $21.57 ON STATE COST	21.57		21.57
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP MID CAP VALUE FUND $0.5507/SHARE ON 797.646 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $439.28 ON FEDERAL COST LT CAPITAL GAIN OF $439.28 ON STATE COST	439.28		439.28
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP SMALL CAP VALUE FUND $2.1798/SHARE ON 247.251 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $538.95 ON FEDERAL COST LT CAPITAL GAIN OF $538.95 ON STATE COST	538.95		538.95

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
12/17/04	RECEIVE ST CAPITAL GAINS DISTRIBUTION ON ONE GROUP MARKET NEUTRAL FD $0.1169/SHARE ON 934.155 SHARES DUE 12/16/04 ST CAPITAL GAIN OF $109.18 ON FEDERAL COST ST CAPITAL GAIN OF $109.18 ON STATE COST	$109.18		$109.18
12/31/04	PURCHASED 327.869 SHARES OF ONE GROUP LARGE CAP GROWTH FUND TRADE DATE 12/30/04 327.869 SHARES AT $15.25 INVESTMENTS AT TAX COST: $5,000.00			(5,000.00)
12/31/04	PURCHASED 164.654 SHARES OF ONE GROUP MID CAP VALUE FUND TRADE DATE 12/30/04 164.654 SHARES AT $18.22 INVESTMENTS AT TAX COST: $3,000.00			(3,000.00)
12/31/04	PURCHASED 188.206 SHARES OF ONE GROUP LARGE CAP VALUE FUND TRADE DATE 12/30/04 188.206 SHARES AT $15.94 INVESTMENTS AT TAX COST: $3,000.00			(3,000.00)
12/31/04	PURCHASED 41.528 SHARES OF ONE GROUP MID CAP GROWTH FUND TRADE DATE 12/30/04 41.528 SHARES AT $24.08 INVESTMENTS AT TAX COST: $1,000.00			(1,000.00)
12/31/04	PURCHASED 125.471 SHARES OF ONE GROUP INCOME BOND FUND TRADE DATE 12/30/04 125.471 SHARES AT $7.97 INVESTMENTS AT TAX COST: $1,000.00			(1,000.00)

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
12/31/04	SOLD 934.155 SHARES OF ONE GROUP MARKET NEUTRAL FD TRADE DATE 12/30/04 934.155 SHARES AT $10.57 INVESTMENTS AT TAX COST: $-9,602.71	$271.31		$9,874.02
12/31/04	SOLD 102.399 SHARES OF ONE GROUP GOVERNMENT BOND FUND TRADE DATE 12/30/04 102.399 SHARES AT $10.36 INVESTMENTS AT TAX COST: $-929.78	131.07		1,060.85
12/31/04	CASH DISBURSEMENT TRANSFER TO PRINCIPAL		$(20.08)	
12/31/04	CASH RECEIPT TRANSFER FROM INCOME			20.08
			Income	Principal
Ending cash balance 12/31/04			$0.00	$0.00

No pending trades.

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Although market values and prices for publicly-traded securities have been obtained from sources or third parties Bank One believes to be reliable, Bank One does not guarantee their accuracy. Certain assets may not be held by Bank One,and their reporting is at the request and for the convenience of the account owner. Certain assets, including, but not limited to, closely held, non-publicly-traded and infrequently traded securities, derivatives, partnership interests, tangible assets, and life insurance policy cash values cannot be readily priced. The valuation, pricing and/or transaction information is not independently verified by Bank One, is reflected as of the last date provided to Bank One and may not be current. Such information may not be determined by Bank One and may not have been provided to us by third parties who are not independent of the issuer or manager. Certain assets may be carried at cost.

This statement is not an official document for income tax reporting purposes.

When reviewing your Bond quality table, the percentages are rounded to zero when the percentage for a rating category is less than one percent.

When reviewing your Holdings detail, the market value listed for each asset may not equal quantity multiplied by share price due to rounding. The Market value column will always provide the most accurate figure.

Market values noted in the Market reconciliation and Transaction detail are as of the end of the statement period. The market value on the date of the transaction may be different.

Please be aware that the information shown in the Realized gain/(loss) column (found in the Transaction detail section of your statement) is based on TAX COST, even though the assets on your statement may be carried at Book value. Please contact your Advisor if you have questions regarding this information or any part of your statement.

Bank One or its affiliates may receive and accept from time to time 12B-1 fees, shareholder servicing fees, sub-transfer agency fees, network reimbursement fees, or other fees from unaffiliated mutual funds as described in the prospectus for the fund with respect to eligible accounts. Bank One has taken steps to avoid receiving fees with respect to ineligible accounts. If Bank One inadvertently receives any such fees for ineligible accounts, such fees will be returned to the fund's distributors or other payor.

Life insurance values are shown at cash surrender value most recently reported by you or the Insurance Company, except where the value shown is $1.00. If the value is $1.00, we have not received a cash surrender value.

FLORIDA CLIENTS, please note that an action for breach of trust based on matters disclosed in a trust accounting or other written report of the Trustee may be subject to a 6-month statute of limitations from the receipt of the trust accounting or other written report. Questions, please consult your attorney. (FL ST sec. 737.307)

Proprietary and non-proprietary mutual funds and other securities are not insured or guaranteed by the Federal Deposit Insurance Corporation (FDIC) or any other government sponsored agency of the federal or any state government. One Group Mutual Funds are not deposits or obligations of and are not guaranteed by, JPMorgan Chase & Co. or its bank or non-bank affiliates. Affiliates of JPMorgan Chase & Co., including the legal entity providing this statement, receive fees for providing various services to the funds. Prospectuses, fee disclosure statements and annual reports for the One Group Funds are always available. For more information, please contact your advisor, One Group at (800) 480-4111 or logon to www.onegroup.com.

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BANK ONE.

BANK ONE

Annual Account Statement

ROBERT ALAN SENSENBRENNER TR
Account number 9572031510
January 1, 2004 - December 31, 2004

BANK ONE TRUST COMPANY, N.A.
111 E WISCONSIN AVE,12TH FLOOR
MILWAUKEE, WI 53202

www.bankone.com

Your Advisor is:
LYNN E PAULL
(414) 977-2027 or (800) 928-4556

Thank you for the opportunity to serve your financial needs. We appreciate your confidence in us.

Please remember to check the Bulletin board (located at the back of your statement) for important messages from Bank One.

Don't hesitate to contact your advisor if you have any questions, comments or concerns.

05038 02323
F JAMES SENSENBRENNER JR
609 FORT WILLIAMS PKWY
ALEXANDRIA VA 22304-1813

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BANK ONE.

Holdings summary

	Value on December 31, 2004	Value on December 31, 2003	Change in value
Cash equivalents	$1,246.86		
Equities	142,109.19		
Fixed income	6,774.22		
Other	0.00		
Total holdings	**$150,130.27**	$135,718.39	**$14,411.88**
Accruals (Income earned but not yet received)	$739.87		
Total holdings with accruals	**$150,870.14**		

Income summary

Income	Statement period	January 1 to December 31
Dividends (domestic/foreign/mutual fund income)	$973.04	$973.04
Interest (taxable/non-taxable)	19.50	19.50
Other income	0.00	0.00
Total income	**$992.54**	$992.54
Realized gain/(loss)		
	$3,488.04	$3,488.04

The income summary includes taxable and tax-exempt income for both principal and income beneficiaries, please refer to the Transaction detail for an income breakdown. These amounts represent approximate income and gain/(loss) amounts and should not be used for final Internal Revenue Service reporting.

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Market reconciliation

	Statement period	January 1 to December 31
Beginning market value	$135,718.39	$135,718.39
Receipts	121.39	121.39
Disbursements	(1,589.84)	(1,589.84)
Income	992.54	992.54
Capital gains distributions	1,150.55	1,150.55
Change in asset market value	13,717.24	13,717.24
Ending market value	$150,130.27	$150,130.27

The Market reconciliation provides a summary of all activity in the account. The Receipts and Disbursements categories may include Non-Cash Transactions such as transfers within the account, name change transactions, asset receipts and distributions, and stock split transactions. The Transaction detail section provides an itemized list of all transactions. The Transaction summary provides a summary of cash receipt and disbursement transactions.

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Transaction summary

	Income	Principal
Beginning cash balance 1/1/04	$(92.07)	$92.07
Cash receipts		
Dividends (domestic/foreign/mutual fund income)	$973.04	$0.00
Interest (taxable/non-taxable)	19.50	0.00
Other cash receipts	95.07	1,176.87
Total cash receipts	$1,087.61	$1,176.87
Cash disbursements		
Cash disbursements	$(26.32)	$(95.07)
Administrative expenses	(969.22)	(479.23)
Total cash disbursements	$(995.54)	$(574.30)
Investment transactions		
Purchases	$0.00	$(25,998.44)
Sales and maturities	0.00	25,303.80
Total investment transactions	$0.00	$(694.64)
Ending cash balance 12/31/04	$0.00	$0.00

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Only the Asset allocation analysis includes mutual fund holdings. The Bond quality and maturity analyses (if applicable) are displayed excluding mutual funds.

Investment objective: Growth

This strategy seeks to provide long-term capital appreciation and overall returns that are competitive with the general equity market by investing at least 80% of its assets in equity securities. Current income is a secondary consideration. Principal volatility is expected to be relatively high.

Asset allocation

0.8% - **Cash equivalents**

94.7% - **Equities**
94.7% - *Mutual funds*

4.5% - **Fixed income**
4.5% - *Mutual funds*

The Asset allocation may not be exactly as described in the Investment objective due to Other Asset holdings.

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BANK ONE.

Holdings detail

Cash equivalents

Very liquid assets Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
ONE GROUP PRIME MONEY MARKET FUND	1,246.860	1.000	$1,246.86	$1,246.86	$0.00	1.73%	$21.57
Total cash equivalents			**$1,246.86**	**$1,246.86**	**$0.00**		**$21.57**

Equities

Mutual funds Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
ONE GROUP DIVERSIFIED EQUITY FUND	1,800.785	12.260	$22,077.62	$19,677.73	$2,399.89	0.64%	$140.46
ONE GROUP DIVERSIFIED INTERNATL FD	297.949	15.850	4,722.49	3,692.86	1,029.63	0.72%	33.97
ONE GROUP INTERNATIONAL EQTY INDX FD	681.792	20.030	13,656.29	9,205.90	4,450.39	0.93%	127.50
ONE GROUP LARGE CAP GROWTH FUND	1,787.320	15.190	27,149.39	22,983.59	4,165.80	0.00%	0.00
ONE GROUP LARGE CAP VALUE FUND	1,733.112	15.850	27,459.83	22,052.77	5,407.06	1.12%	306.76
ONE GROUP MID CAP GROWTH FUND	742.379	24.050	17,854.21	11,627.88	6,226.33	0.00%	0.00
ONE GROUP MID CAP VALUE FUND	975.481	18.160	17,714.73	12,576.63	5,138.10	0.61%	107.30
ONE GROUP SMALL CAP GROWTH FUND	377.929	12.990	4,909.30	3,432.37	1,476.93	0.00%	0.00

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Holdings detail continued

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
ONE GROUP SMALL CAP VALUE FUND	259.720	25.240	$6,555.33	$3,513.69	$3,041.64	0.28%	$18.70
Total equities			$142,109.19	$108,773.42	$33,335.77		$734.69

Fixed income

Mutual funds

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Yield to maturity	Estimated annual income
ONE GROUP BOND FUND (WOBDX)	264.583	10.920	$2,889.25	$2,694.84	$194.41	4.93%		$142.35
ONE GROUP INCOME BOND FUND (HLIPX)	488.675	7.950	3,884.97	3,779.27	105.70	0.44%		17.10
Total fixed income			$6,774.22	$6,474.11	$300.11			$159.45
Total holdings			$150,130.27	$116,494.39	$33,635.88			$915.71
Accruals (income earned but not yet received)			$739.87					
Total holdings with accruals			$150,870.14					

Assets identified with an asterisk (*) at the beginning of the asset name are held in the Invested Income Portfolio.

Transaction detail

			Income	Principal
Beginning cash balance 1/1/04			$(92.07)	$92.07
Date	**Description**	**Realized gain/(loss)**	**Income**	**Principal**
	COMBINED PURCHASES FOR THE PERIOD 1/ 1/04 - 12/31/04 OF ONE GROUP PRIME MONEY MARKET FUND INVESTMENTS AT TAX COST: $2,895.26			$(2,895.26)
	COMBINED SALES FOR THE PERIOD 1/ 1/04 - 12/31/04 OF ONE GROUP PRIME MONEY MARKET FUND INVESTMENTS AT TAX COST: $-3,522.93			3,522.93
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 12/1/03 TO 12/31/03		$9.49	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.023697/SHARE ON 1,645.499 SHARES DUE 1/2/04		38.99	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED INTERNAT'L FD $0.114372/SHARE ON 216.456 SHARES DUE 1/2/04		24.76	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 12/1/03 TO 12/31/03		4.47	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 12/1/03 TO 12/31/03		9.44	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERNATIONAL EQTY INDX FD $0.186693/SHARE ON 757.11 SHARES DUE 1/2/04		141.35	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.045275/SHARE ON 1,488.946 SHARES DUE 1/2/04		$67.32	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.025871/SHARE ON 1,106.634 SHARES DUE 1/2/04		28.63	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.020931/SHARE ON 259.72 SHARES DUE 1/2/04		5.44	
1/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 12/1/03 TO 12/31/03		1.06	
1/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH DECEMBER MONTH END		(39.96)	$(39.96)
1/14/04	CASH DISBURSEMENT TRANSFER TO INCOME			(95.07)
1/14/04	CASH RECEIPT TRANSFER FROM PRINCIPAL		95.07	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 1/1/04 TO 1/31/04		9.28	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 1/1/04 TO 1/31/04		4.27	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 1/1/04 TO 1/31/04		8.87	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
2/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 1/1/04 TO 1/31/04		$1.17	
2/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JANUARY MONTH END		(39.96)	$(39.96)
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 2/1/04 TO 2/29/04		9.28	
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 2/1/04 TO 2/29/04		4.16	
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 2/1/04 TO 2/29/04		8.87	
3/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 2/1/04 TO 2/29/04		1.06	
3/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH FEBRUARY MONTH END		(39.96)	(39.96)
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 3/1/04 TO 3/31/04		9.93	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.015892/SHARE ON 1,645.499 SHARES DUE 4/1/04		26.15	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 3/1/04 TO 3/31/04		4.16	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 3/1/04 TO 3/31/04		$8.58	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.040604/SHARE ON 1,486.946 SHARES DUE 4/1/04		60.38	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.015312/SHARE ON 1,106.634 SHARES DUE 4/1/04		16.94	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.021058/SHARE ON 259.72 SHARES DUE 4/1/04		5.47	
4/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 3/1/04 TO 3/31/04		1.10	
4/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH MARCH MONTH END		(39.96)	$(39.96)
4/27/04	SOLD 33.164 SHARES OF ONE GROUP MID CAP GROWTH FUND TRADE DATE 4/26/04 33.164 SHARES AT $22.68 INVESTMENTS AT TAX COST: $-759.78	$(7.61)		752.17
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 4/1/04 TO 4/30/04		10.38	
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 4/1/04 TO 4/30/04		4.47	

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 4/1/04 TO 4/30/04		$8.87	
5/3/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 4/1/04 TO 4/30/04		1.17	
5/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH APRIL MONTH END		(39.96)	$(39.97)
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 5/1/04 TO 5/31/04		10.14	
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 5/1/04 TO 5/31/04		4.37	
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 5/1/04 TO 5/31/04		8.87	
6/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 5/1/04 TO 5/31/04		1.58	
6/10/04	FIDUCIARY TAX RETURN PREP COLLECTED 2003 FORMS 1041/ 2		(490.00)	
6/14/04	ADMINISTRATIVE FEES COLLECTED THROUGH MAY MONTH END		(39.96)	(39.96)
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 6/1/04 TO 6/30/04		10.14	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.019605/SHARE ON 1,645.499 SHARES DUE 7/1/04		$32.26	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 6/1/04 TO 6/30/04		4.37	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 6/1/04 TO 6/30/04		8.87	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.045164/SHARE ON 1,486.948 SHARES DUE 7/1/04		67.16	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.040723/SHARE ON 1,106.634 SHARES DUE 7/1/04		45.07	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.003055/SHARE ON 259.72 SHARES DUE 7/1/04		0.79	
7/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 6/1/04 TO 6/30/04		1.41	
7/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JUNE MONTH END		(39.91)	$(39.91)
7/20/04	PURCHASED 279.125 SHARES OF ONE GROUP MARKET NEUTRAL FD TRADE DATE 7/19/04 279.125 SHARES AT $10.61 INVESTMENTS AT TAX COST: $2,961.52			(2,961.52)

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
7/20/04	PURCHASED 142.399 SHARES OF ONE GROUP LARGE CAP GROWTH FUND TRADE DATE 7/19/04 142.399 SHARES AT $13.94 INVESTMENTS AT TAX COST: $1,985.04			$(1,985.04)
7/20/04	PURCHASED 155.288 SHARES OF ONE GROUP DIVERSIFIED EQUITY FUND TRADE DATE 7/19/04 155.288 SHARES AT $11.38 INVESTMENTS AT TAX COST: $1,767.16			(1,767.16)
7/20/04	PURCHASED 81.493 SHARES OF ONE GROUP DIVERSIFIED INTERNAT'L FD TRADE DATE 7/19/04 81.493 SHARES AT $13.84 INVESTMENTS AT TAX COST: $1,127.86			(1,127.86)
7/20/04	PURCHASED 57.96 SHARES OF ONE GROUP LARGE CAP VALUE FUND TRADE DATE 7/19/04 57.96 SHARES AT $14.20 INVESTMENTS AT TAX COST: $823.03			(823.03)
7/20/04	SOLD 295.807 SHARES OF ONE GROUP MID CAP VALUE FUND TRADE DATE 7/19/04 295.807 SHARES AT $16.89 INVESTMENTS AT TAX COST: $-3,741.96	$1,254.22		4,996.18

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
7/20/04	SOLD 173.695 SHARES OF ONE GROUP MID CAP GROWTH FUND TRADE DATE 7/19/04 173.695 SHARES AT $21.12 INVESTMENTS AT TAX COST: $-3,141.11	$527.32		$3,658.43
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 7/1/04 TO 7/31/04		$9.93	
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 7/1/04 TO 7/31/04		4.27	
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 7/1/04 TO 7/31/04		8.58	
8/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 7/1/04 TO 7/31/04		1.71	
8/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JULY MONTH END		(39.91)	(39.91)
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 8/1/04 TO 8/31/04		9.71	
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 8/1/04 TO 8/31/04		4.27	
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 8/1/04 TO 8/31/04		9.16	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
9/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 8/1/04 TO 8/31/04		$1.98	
9/13/04	ADMINISTRATIVE FEES COLLECTED THROUGH AUGUST MONTH END		(39.91)	$(39.91)
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 9/1/04 TO 9/30/04		9.28	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.018352/SHARE ON 1,800.785 SHARES DUE 10/1/04		33.05	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 9/1/04 TO 9/30/04		4.16	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 9/1/04 TO 9/30/04		8.58	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.046306/SHARE ON 1,544.906 SHARES DUE 10/1/04		71.54	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.02841/SHARE ON 810.827 SHARES DUE 10/1/04		23.04	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.026621/SHARE ON 259.72 SHARES DUE 10/1/04		6.91	

BANK ONE.

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
10/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 9/1/04 TO 9/30/04		$2.12	
10/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH SEPTEMBER MONTH END		(39.91)	$(39.91)
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 10/1/04 TO 10/31/04		9.06	
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 10/1/04 TO 10/31/04		4.06	
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 10/1/04 TO 10/31/04		8.30	
11/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 10/1/04 TO 10/31/04		2.48	
11/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH OCTOBER MONTH END		(39.91)	(39.91)
11/23/04	PURCHASED 77.11 SHARES OF ONE GROUP INCOME BOND FUND TRADE DATE 11/22/04 77.11 SHARES AT $7.98 INVESTMENTS AT TAX COST: $615.34			(615.34)
11/23/04	PURCHASED 48.818 SHARES OF ONE GROUP BOND FUND TRADE DATE 11/22/04 48.818 SHARES AT $10.96 INVESTMENTS AT TAX COST: $535.04			(535.04)

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
11/23/04	PURCHASED 26.934 SHARES OF ONE GROUP MARKET NEUTRAL FD TRADE DATE 11/22/04 26.934 SHARES AT $10.70 INVESTMENTS AT TAX COST: $288.19			$(288.19)
11/23/04	SOLD 75.318 SHARES OF ONE GROUP INTERNATIONAL EQTY INDX FD TRADE DATE 11/22/04 75.318 SHARES AT $19.10 INVESTMENTS AT TAX COST: $-1,286.28	$152.29		1,438.57
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 11/1/04 TO 11/30/04		$11.64	
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 11/1/04 TO 11/30/04		4.27	
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 11/1/04 TO 11/30/04		11.26	
12/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 11/1/04 TO 11/30/04		2.66	
12/13/04	ADMINISTRATIVE FEES COLLECTED THROUGH NOVEMBER MONTH END		(39.91)	(39.91)

4701

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP MARKET NEUTRAL FD $0.0076/SHARE ON 931.639 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $7.07 ON FEDERAL COST LT CAPITAL GAIN OF $7.07 ON STATE COST	$7.07		$7.07
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP SMALL CAP GROWTH FUND $0.058/SHARE ON 377.929 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $21.92 ON FEDERAL COST LT CAPITAL GAIN OF $21.92 ON STATE COST	21.92		21.92
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP MID CAP VALUE FUND $0.5507/SHARE ON 810.827 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $446.54 ON FEDERAL COST LT CAPITAL GAIN OF $446.54 ON STATE COST	446.54		446.54
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP SMALL CAP VALUE FUND $2.1798/SHARE ON 259.72 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $566.13 ON FEDERAL COST LT CAPITAL GAIN OF $566.13 ON STATE COST	566.13		566.13
12/17/04	RECEIVE ST CAPITAL GAINS DISTRIBUTION ON ONE GROUP MARKET NEUTRAL FD $0.1169/SHARE ON 931.639 SHARES DUE 12/16/04 ST CAPITAL GAIN OF $108.89 ON FEDERAL COST ST CAPITAL GAIN OF $108.89 ON STATE COST	108.89		108.89
12/31/04	PURCHASED 327.869 SHARES OF ONE GROUP LARGE CAP GROWTH FUND TRADE DATE 12/30/04 327.869 SHARES AT $15.25 INVESTMENTS AT TAX COST: $5,000.00			(5,000.00)

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
12/31/04	PURCHASED 164.654 SHARES OF ONE GROUP MID CAP VALUE FUND TRADE DATE 12/30/04 164.654 SHARES AT $18.22 INVESTMENTS AT TAX COST: $3,000.00			$(3,000.00)
12/31/04	PURCHASED 188.206 SHARES OF ONE GROUP LARGE CAP VALUE FUND TRADE DATE 12/30/04 188.206 SHARES AT $15.94 INVESTMENTS AT TAX COST: $3,000.00			(3,000.00)
12/31/04	PURCHASED 125.471 SHARES OF ONE GROUP INCOME BOND FUND TRADE DATE 12/30/04 125.471 SHARES AT $7.97 INVESTMENTS AT TAX COST: $1,000.00			(1,000.00)
12/31/04	PURCHASED 41.528 SHARES OF ONE GROUP MID CAP GROWTH FUND TRADE DATE 12/30/04 41.528 SHARES AT $24.08 INVESTMENTS AT TAX COST: $1,000.00			(1,000.00)
12/31/04	SOLD 931.639 SHARES OF ONE GROUP MARKET NEUTRAL FD TRADE DATE 12/30/04 931.639 SHARES AT $10.57 INVESTMENTS AT TAX COST: $-9,569.35	$278.07		9,847.42
12/31/04	SOLD 104.064 SHARES OF ONE GROUP GOVERNMENT BOND FUND TRADE DATE 12/30/04 104.064 SHARES AT $10.36 INVESTMENTS AT TAX COST: $-944.90	133.20		1,078.10

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BANK ONE.

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
12/31/04	CASH DISBURSEMENT TRANSFER TO PRINCIPAL		$(26.32)	
12/31/04	CASH RECEIPT TRANSFER FROM INCOME			$26.32
			Income	Principal
Ending cash balance 12/31/04			$0.00	$0.00

No pending trades.

Although market values and prices for publicly-traded securities have been obtained from sources or third parties Bank One believes to be reliable, Bank One does not guarantee their accuracy. Certain assets may not be held by Bank One,and their reporting is at the request and for the convenience of the account owner. Certain assets, including, but not limited to, closely held, non-publicly-traded and infrequently traded securities, derivatives, partnership interests, tangible assets, and life insurance policy cash values cannot be readily priced. The valuation, pricing and/or transaction information is not independently verified by Bank One, is reflected as of the last date provided to Bank One and may not be current. Such information may not be determined by Bank One and may not have been provided to us by third parties who are not independent of the issuer or manager. Certain assets may be carried at cost.

This statement is not an official document for income tax reporting purposes.

When reviewing your Bond quality table, the percentages are rounded to zero when the percentage for a rating category is less than one percent.

When reviewing your Holdings detail, the market value listed for each asset may not equal quantity multiplied by share price due to rounding. The Market value column will always provide the most accurate figure.

Market values noted in the Market reconciliation and Transaction detail are as of the end of the statement period. The market value on the date of the transaction may be different.

Please be aware that the information shown in the Realized gain/(loss) column (found in the Transaction detail section of your statement) is based on TAX COST, even though the assets on your statement may be carried at Book value. Please contact your Advisor if you have questions regarding this information or any part of your statement.

Bank One or its affiliates may receive and accept from time to time 12B-1 fees, shareholder servicing fees, sub-transfer agency fees, network reimbursement fees, or other fees from unaffiliated mutual funds as described in the prospectus for the fund with respect to eligible accounts. Bank One has taken steps to avoid receiving fees with respect to ineligible accounts. If Bank One inadvertently receives any such fees for ineligible accounts, such fees will be returned to the fund's distributors or other payor.

Life Insurance values are shown at cash surrender value most recently reported by you or the Insurance Company, except where the value shown is $1.00. If the value is $1.00, we have not received a cash surrender value.

FLORIDA CLIENTS, please note that an action for breach of trust based on matters disclosed in a trust accounting or other written report of the Trustee may be subject to a 6-month statute of limitations from the receipt of the trust accounting or other written report. Questions, please consult your attorney. (FL ST sec. 737.307)

Proprietary and non-proprietary mutual funds and other securities are not insured or guaranteed by the Federal Deposit Insurance Corporation (FDIC) or any other government sponsored agency of the federal or any state government. One Group Mutual Funds are not deposits or obligations of and are not guaranteed by, JPMorgan Chase & Co. or its bank or non-bank affiliates. Affiliates of JPMorgan Chase & Co., including the legal entity providing this statement, receive fees for providing various services to the funds. Prospectuses, fee disclosure statements and annual reports for the One Group Funds are always available. For more information, please contact your advisor, One Group at (800) 480-4111 or logon to www.onegroup.com.

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BANK ONE.

Annual Account Statement

ROBERT ALAN SENSENBRENNER 1993 TRUST
Account number 9572131310
January 1, 2004 - December 31, 2004

BANK ONE TRUST COMPANY, N.A.
111 E WISCONSIN AVE,12TH FLOOR
MILWAUKEE, WI 53202

www.bankone.com

Your Advisor is:
LYNN E PAULL
(414) 977-2027 or (800) 926-4556

Thank you for the opportunity to serve your financial needs. We appreciate your confidence in us.

Please remember to check the Bulletin board (located at the back of your statement) for important messages from Bank One.

Don't hesitate to contact your advisor if you have any questions, comments or concerns.

05038 02335
F JAMES SENSENBRENNER JR
609 FORT WILLIAMS PKWY
ALEXANDRIA VA 22304-1813

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BANK ONE.

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Holdings summary

	Value on December 31, 2004	Value on December 31, 2003	Change in value
Cash equivalents	$10,690.93		
Equities	324,378.17		
Fixed income	13,846.55		
Other	0.00		
Total holdings	**$348,915.65**	$314,819.77	**$34,095.88**
Accruals (income earned but not yet received)	$1,630.85		
Total holdings with accruals	**$350,546.50**		

Income summary

Income	Statement period	January 1 to December 31
Dividends (domestic/foreign/mutual fund income)	$2,250.40	$2,250.40
Interest (taxable/non-taxable)	46.32	46.32
Other income	0.00	0.00
Total income	**$2,296.72**	$2,296.72
Realized gain/(loss)		
	$4,914.98	$4,914.98

The income summary includes taxable and tax-exempt income for both principal and income beneficiaries, please refer to the Transaction detail for an income breakdown. These amounts represent approximate income and gain/(loss) amounts and should not be used for final Internal Revenue Service reporting.

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Market reconciliation

	Statement period	January 1 to December 31
Beginning market value	$314,819.77	$314,819.77
Receipts	694.26	694.26
Disbursements	(3,409.25)	(3,409.25)
Income	2,296.72	2,296.72
Capital gains distributions	2,640.20	2,640.20
Change in asset market value	31,873.95	31,873.95
Ending market value	$348,915.65	$348,915.65

The Market reconciliation provides a summary of all activity in the account. The Receipts and Disbursements categories may include Non-Cash Transactions such as transfers within the account, name change transactions, asset receipts and distributions, and stock split transactions. The Transaction detail section provides an itemized list of all transactions. The Transaction summary provides a summary of cash receipt and disbursement transactions.

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Transaction summary

	Income	Principal
Beginning cash balance 1/1/04	$0.00	$0.00
Cash receipts		
Dividends (domestic/foreign/mutual fund income)	$2,250.40	$0.00
Interest (taxable/non-taxable)	46.32	0.00
Other cash receipts	0.00	3,334.46
Total cash receipts	$2,296.72	$3,334.46
Cash disbursements		
Cash disbursements	$(694.26)	$0.00
Administrative expenses	(1,602.46)	(1,112.53)
Total cash disbursements	$(2,296.72)	$(1,112.53)
Investment transactions		
Purchases	$0.00	$(29,371.47)
Sales and maturities	0.00	27,149.54
Total investment transactions	$0.00	$(2,221.93)
Ending cash balance 12/31/04	$0.00	$0.00

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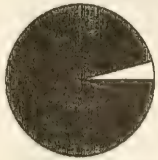
BANK ONE.

Only the Asset allocation analysis includes mutual fund holdings. The Bond quality and maturity analyses (if applicable) are displayed excluding mutual funds.

Investment objective: Growth

This strategy seeks to provide long-term capital appreciation and overall returns that are competitive with the general equity market by investing at least 80% of its assets in equity securities. Current income is a secondary consideration. Principal volatility is expected to be relatively high.

Asset allocation



3.1% - **Cash equivalents**

92.9% - **Equities**
92.9% - *Mutual funds*

4.0% - **Fixed income**
4.0% - *Mutual funds*

The Asset allocation may not be exactly as described in the Investment objective due to Other Asset holdings.

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BANK ONE.

Holdings detail

Cash equivalents

Very liquid assets

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
ONE GROUP PRIME MONEY MARKET FUND	10,690.930	1.000	$10,690.93	$10,690.93	$0.00	1.73%	$184.95
Total cash equivalents			**$10,690.93**	**$10,690.93**	**$0.00**		**$184.95**

Equities

Mutual funds

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
ONE GROUP DIVERSIFIED EQUITY FUND	4,184.167	12.260	$51,297.89	$47,836.02	$3,461.87	0.64%	$326.37
ONE GROUP DIVERSIFIED INTERNAT'L FD	692.267	15.850	10,972.43	10,863.65	108.78	0.72%	78.92
ONE GROUP INTERNATIONAL EQTY INDX FD	1,583.985	20.030	31,727.22	23,168.77	8,558.45	0.93%	296.21
ONE GROUP LARGE CAP GROWTH FUND	3,390.951	15.190	51,508.55	45,392.28	6,116.27	0.00%	0.00
ONE GROUP LARGE CAP VALUE FUND	3,592.667	15.850	56,943.77	46,204.28	10,739.49	1.12%	635.90
ONE GROUP MARKET NEUTRAL FD	2,102.092	10.580	22,240.13	21,566.02	674.11	0.00%	0.00
ONE GROUP MID CAP GROWTH FUND	1,627.729	24.050	39,146.88	27,403.69	11,743.19	0.00%	0.00
ONE GROUP MID CAP VALUE FUND	1,883.969	18.160	34,212.88	23,034.69	11,178.19	0.61%	207.24
ONE GROUP SMALL CAP GROWTH FUND	876.785	12.990	11,389.44	7,891.92	3,497.52	0.00%	0.00

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Holdings detail continued

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain/(loss)	Current yield		Estimated annual income
ONE GROUP SMALL CAP VALUE FUND	591.877	25.240	$14,938.98	$8,215.85	$6,723.13	0.28%		$42.62
Total equities			$324,378.17	$261,577.17	$62,801.00			$1,587.26

Fixed income

Mutual funds

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain/(loss)	Current yield	Yield to maturity	Estimated annual income
ONE GROUP BOND FUND (WOBDX)	555.901	10.920	$6,070.44	$5,615.37	$455.07	4.93%		$299.07
ONE GROUP GOVERNMENT BOND FUND (HLGAX)	240.831	10.350	2,492.60	2,203.58	289.02	4.77%		118.97
ONE GROUP INCOME BOND FUND (HLIPX)	664.592	7.950	5,283.51	4,962.04	321.47	0.44%		23.26
Total fixed income			$13,846.55	$12,780.99	$1,065.56			$441.30
Total holdings			$348,915.65	$285,049.09	$63,866.56			$2,213.51
Accruals (income earned but not yet received)			$1,630.85					
Total holdings with accruals			$350,546.50					

Assets identified with an asterisk (*) at the beginning of the asset name are held in the Invested Income Portfolio.

Transaction detail

			Income	Principal
Beginning cash balance 1/1/04			$0.00	$0.00
Date	Description	Realized gain/(loss)	Income	Principal
	COMBINED PURCHASES FOR THE PERIOD 1/ 1/04 - 12/31/04 OF ONE GROUP PRIME MONEY MARKET FUND INVESTMENTS AT TAX COST: $8,230.05			$(8,230.05)
	COMBINED SALES FOR THE PERIOD 1/ 1/04 - 12/31/04 OF ONE GROUP PRIME MONEY MARKET FUND INVESTMENTS AT TAX COST: $-2,714.99			2,714.99
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 12/1/03 TO 12/31/03		$20.91	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.023697/SHARE ON 3,817.73 SHARES DUE 1/2/04		90.47	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED INTERNAT'L FD $0.114372/SHARE ON 498.646 SHARES DUE 1/2/04		57.03	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 12/1/03 TO 12/31/03		10.36	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 12/1/03 TO 12/31/03		21.93	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERNATIONAL EQTY INDX FD $0.186693/SHARE ON 1,756.4 SHARES DUE 1/2/04		327.91	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.045275/SHARE ON 3,449.626 SHARES DUE 1/2/04		$156.18	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.025871/SHARE ON 2,567.497 SHARES DUE 1/2/04		66.42	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.020931/SHARE ON 591.877 SHARES DUE 1/2/04		12.39	
1/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 12/1/03 TO 12/31/03		2.92	
1/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH DECEMBER MONTH END		(92.69)	$(92.69)
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 1/1/04 TO 1/31/04		20.44	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 1/1/04 TO 1/31/04		9.87	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 1/1/04 TO 1/31/04		20.60	
2/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 1/1/04 TO 1/31/04		3.18	
2/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JANUARY MONTH END		(92.68)	(92.69)

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 2/1/04 TO 2/29/04		$20.44	
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 2/1/04 TO 2/29/04		9.63	
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 2/1/04 TO 2/29/04		20.60	
3/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 2/1/04 TO 2/29/04		2.88	
3/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH FEBRUARY MONTH END		(92.68)	$(92.68)
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 3/1/04 TO 3/31/04		21.86	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.015892/SHARE ON 3,817.73 SHARES DUE 4/1/04		60.67	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 3/1/04 TO 3/31/04		9.63	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 3/1/04 TO 3/31/04		19.94	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.040604/SHARE ON 3,449.626 SHARES DUE 4/1/04		$140.07	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.015312/SHARE ON 2,567.497 SHARES DUE 4/1/04		39.31	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.021058/SHARE ON 591.877 SHARES DUE 4/1/04		12.46	
4/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 3/1/04 TO 3/31/04		3.00	
4/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH MARCH MONTH END		(92.68)	$(92.68)
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 4/1/04 TO 4/30/04		22.82	
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 4/1/04 TO 4/30/04		10.36	
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 4/1/04 TO 4/30/04		20.60	
5/3/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 4/1/04 TO 4/30/04		3.02	
5/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH APRIL MONTH END		(92.68)	(92.68)

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 5/1/04 TO 5/31/04		$22.34	
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 5/1/04 TO 5/31/04		10.11	
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 5/1/04 TO 5/31/04		20.60	
6/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 5/1/04 TO 5/31/04		3.14	
6/10/04	FIDUCIARY TAX RETURN PREP COLLECTED 2003 FORMS 1041/2		(490.00)	
6/14/04	ADMINISTRATIVE FEES COLLECTED THROUGH MAY MONTH END		(92.68)	$(92.68)
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 6/1/04 TO 6/30/04		22.34	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.019605/SHARE ON 3,817.73 SHARES DUE 7/1/04		74.85	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 6/1/04 TO 6/30/04		10.11	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 6/1/04 TO 6/30/04		20.60	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.045164/SHARE ON 3,449.626 SHARES DUE 7/1/04		$155.80	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.040723/SHARE ON 2,567.497 SHARES DUE 7/1/04		104.56	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.003055/SHARE ON 591.877 SHARES DUE 7/1/04		1.81	
7/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 6/1/04 TO 6/30/04		3.00	
7/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JUNE MONTH END		(92.72)	$(92.73)
7/20/04	PURCHASED 650.794 SHARES OF ONE GROUP MARKET NEUTRAL FD TRADE DATE 7/19/04 650.794 SHARES AT $10.61 INVESTMENTS AT TAX COST: $6,904.92			(6,904.92)
7/20/04	PURCHASED 321.087 SHARES OF ONE GROUP LARGE CAP GROWTH FUND TRADE DATE 7/19/04 321.087 SHARES AT $13.94 INVESTMENTS AT TAX COST: $4,475.68			(4,475.68)
7/20/04	PURCHASED 366.437 SHARES OF ONE GROUP DIVERSIFIED EQUITY FUND TRADE DATE 7/19/04 366.437 SHARES AT $11.38 INVESTMENTS AT TAX COST: $4,170.05			(4,170.05)

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
7/20/04	PURCHASED 193.621 SHARES OF ONE GROUP DIVERSIFIED INTERNAT'L FD TRADE DATE 7/19/04 193.621 SHARES AT $13.84 INVESTMENTS AT TAX COST: $2,679.71			$(2,679.71)
7/20/04	PURCHASED 143.041 SHARES OF ONE GROUP LARGE CAP VALUE FUND TRADE DATE 7/19/04 143.041 SHARES AT $14.20 INVESTMENTS AT TAX COST: $2,031.18			(2,031.18)
7/20/04	PURCHASED 80.575 SHARES OF ONE GROUP BOND FUND TRADE DATE 7/19/04 80.575 SHARES AT $10.92 INVESTMENTS AT TAX COST: $879.88			(879.88)
7/20/04	SOLD 683.528 SHARES OF ONE GROUP MID CAP VALUE FUND TRADE DATE 7/19/04 683.528 SHARES AT $16.89 INVESTMENTS AT TAX COST: $-8,713.58	$2,831.20		11,544.78
7/20/04	SOLD 454.386 SHARES OF ONE GROUP MID CAP GROWTH FUND TRADE DATE 7/19/04 454.386 SHARES AT $21.12 INVESTMENTS AT TAX COST: $-10,177.98	(581.34)		9,596.64
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 7/1/04 TO 7/31/04		$25.57	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 7/1/04 TO 7/31/04		$9.87	
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 7/1/04 TO 7/31/04		19.94	
8/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 7/1/04 TO 7/31/04		3.77	
8/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JULY MONTH END		(92.73)	$(92.74)
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 8/1/04 TO 8/31/04		25.02	
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 8/1/04 TO 8/31/04		9.87	
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 8/1/04 TO 8/31/04		21.27	
9/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 8/1/04 TO 8/31/04		4.35	
9/13/04	ADMINISTRATIVE FEES COLLECTED THROUGH AUGUST MONTH END		(92.73)	(92.74)
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 9/1/04 TO 9/30/04		23.90	

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.018352/SHARE ON 4,184.167 SHARES DUE 10/1/04		$76.79	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 9/1/04 TO 9/30/04		9.63	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 9/1/04 TO 9/30/04		19.94	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.046306/SHARE ON 3,592.667 SHARES DUE 10/1/04		166.36	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.02841/SHARE ON 1,883.969 SHARES DUE 10/1/04		53.52	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.026621/SHARE ON 591.877 SHARES DUE 10/1/04		15.76	
10/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 9/1/04 TO 9/30/04		4.65	
10/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH SEPTEMBER MONTH END		(92.73)	$(92.74)
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 10/1/04 TO 10/31/04		23.35	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 10/1/04 TO 10/31/04		$9.39	
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 10/1/04 TO 10/31/04		19.27	
11/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 10/1/04 TO 10/31/04		5.45	
11/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH OCTOBER MONTH END		(92.73)	$(92.74)
11/23/04	SOLD 172.415 SHARES OF ONE GROUP INTERNATIONAL EQTY INDX FD TRADE DATE 11/22/04 172.415 SHARES AT $19.10 INVESTMENTS AT TAX COST: $-3,268.21	$24.92		3,293.13
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 11/1/04 TO 11/30/04		24.46	
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 11/1/04 TO 11/30/04		9.87	
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 11/1/04 TO 11/30/04		20.60	
12/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 11/1/04 TO 11/30/04		6.96	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
12/13/04	ADMINISTRATIVE FEES COLLECTED THROUGH NOVEMBER MONTH END		$(92.73)	$(92.74)
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP MARKET NEUTRAL FD $0.0078/SHARE ON 2,102.092 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $15.95 ON FEDERAL COST LT CAPITAL GAIN OF $15.95 ON STATE COST	$15.95		15.95
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP SMALL CAP GROWTH FUND $0.058/SHARE ON 876.785 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $50.86 ON FEDERAL COST LT CAPITAL GAIN OF $50.86 ON STATE COST	50.86		50.86
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP MID CAP VALUE FUND $0.5507/SHARE ON 1,883.969 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $1,037.54 ON FEDERAL COST LT CAPITAL GAIN OF $1,037.54 ON STATE COST	1,037.54		1,037.54
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP SMALL CAP VALUE FUND $2.1798/SHARE ON 591.877 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $1,290.16 ON FEDERAL COST LT CAPITAL GAIN OF $1,290.16 ON STATE COST	1,290.16		1,290.16

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
12/17/04	RECEIVE ST CAPITAL GAINS DISTRIBUTION ON ONE GROUP MARKET NEUTRAL FD $0.1169/SHARE ON 2,102.092 SHARES DUE 12/16/04 ST CAPITAL GAIN OF $245.69 ON FEDERAL COST ST CAPITAL GAIN OF $245.69 ON STATE COST	$245.69		$245.69
12/31/04	CASH DISBURSEMENT TRANSFER TO PRINCIPAL		$(694.26)	
12/31/04	CASH RECEIPT TRANSFER FROM INCOME			694.26
			Income	Principal
Ending cash balance 12/31/04			$0.00	$0.00

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Pending trades

Pending purchases

Trade date	Description	Amount
12/31/04	ONE GROUP LARGE CAP GROWTH FUND 789.993 SHARES AT $15.19/SHARE, ANTICIPATED SETTLEMENT DATE 01/03/2005.	$(12,000.00)
12/31/04	ONE GROUP INTERNATIONAL EQTY INDX FD 499.251 SHARES AT $20.03/SHARE, ANTICIPATED SETTLEMENT DATE 01/03/2005.	(10,000.00)
12/31/04	ONE GROUP INCOME BOND FUND (HLIPX) 313.283 UNITS AT $7.98/UNIT, ANTICIPATED SETTLEMENT DATE 01/03/2005.	(2,500.00)
12/31/04	ONE GROUP MID CAP GROWTH FUND 83.16 SHARES AT $24.05/SHARE, ANTICIPATED SETTLEMENT DATE 01/03/2005.	(2,000.00)
12/31/04	ONE GROUP MID CAP VALUE FUND 385.463 SHARES AT $18.16/SHARE, ANTICIPATED SETTLEMENT DATE 01/03/2005.	(7,000.00)

Pending trades continued

Trade date	Description	Amount
12/31/04	ONE GROUP LARGE CAP VALUE FUND 504.732 SHARES AT $15.85/SHARE, ANTICIPATED SETTLEMENT DATE 01/03/2005.	$(8,000.00)
Total pending purchases		$(41,500.00)
Pending sales		
12/31/04	ONE GROUP GOVERNMENT BOND FUND (HLGAX) 240.831 UNITS AT $10.35/UNIT, ANTICIPATED SETTLEMENT DATE 01/03/2005.	$2,492.60
12/31/04	ONE GROUP DIVERSIFIED INTERNAT'L FD 692.267 SHARES AT $15.85/SHARE, ANTICIPATED SETTLEMENT DATE 01/03/2005.	10,972.43
12/31/04	ONE GROUP MARKET NEUTRAL FD 2,102.092 SHARES AT $10.58/SHARE, ANTICIPATED SETTLEMENT DATE 01/03/2005.	22,240.13
Total pending sales		$35,705.16

The settlement amount(s) appearing in the Pending trades section is net of commissions, therefore shares multiplied by price may not equal the settlement amount.

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Although market values and prices for publicly-traded securities have been obtained from sources or third parties Bank One believes to be reliable, Bank One does not guarantee their accuracy. Certain assets may not be held by Bank One,and their reporting is at the request and for the convenience of the account owner. Certain assets, including, but not limited to, closely held, non-publicly-traded and infrequently traded securities, derivatives, partnership interests, tangible assets, and life insurance policy cash values cannot be readily priced. The valuation, pricing and/or transaction information is not independently verified by Bank One, is reflected as of the last date provided to Bank One and may not be current. Such information may not be determined by Bank One and may not have been provided to us by third parties who are not independent of the issuer or manager. Certain assets may be carried at cost.

This statement is not an official document for income tax reporting purposes.

When reviewing your Bond quality table, the percentages are rounded to zero when the percentage for a rating category is less than one percent.

When reviewing your Holdings detail, the market value listed for each asset may not equal quantity multiplied by share price due to rounding. The Market value column will always provide the most accurate figure.

Market values noted in the Market reconciliation and Transaction detail are as of the end of the statement period. The market value on the date of the transaction may be different.

Please be aware that the information shown in the Realized gain/(loss) column (found in the Transaction detail section of your statement) is based on TAX COST, even though the assets on your statement may be carried at Book value. Please contact your Advisor if you have questions regarding this information or any part of your statement.

Bank One or its affiliates may receive and accept from time to time 12B-1 fees, shareholder servicing fees, sub-transfer agency fees, network reimbursement fees, or other fees from unaffiliated mutual funds as described in the prospectus for the fund with respect to eligible accounts. Bank One has taken steps to avoid receiving fees with respect to ineligible accounts. If Bank One inadvertently receives any such fees for ineligible accounts, such fees will be returned to the fund's distributors or other payor.

Life Insurance values are shown at cash surrender value most recently reported by you or the Insurance Company, except where the value shown is $1.00. If the value is $1.00, we have not received a cash surrender value.

FLORIDA CLIENTS, please note that an action for breach of trust based on matters disclosed in a trust accounting or other written report of the Trustee may be subject to a 6-month statute of limitations from the receipt of the trust accounting or other written report. Questions, please consult your attorney. (FL ST sec. 737.307)

Proprietary and non-proprietary mutual funds and other securities are not insured or guaranteed by the Federal Deposit Insurance Corporation (FDIC) or any other government sponsored agency of the federal or any state government. One Group Mutual Funds are not deposits or obligations of and are not guaranteed by, JPMorgan Chase & Co. or its bank or non-bank affiliates. Affiliates of JPMorgan Chase & Co., including the legal entity providing this statement, receive fees for providing various services to the funds. Prospectuses, fee disclosure statements and annual reports for the One Group Funds are always available. For more information, please contact your advisor, One Group at (800) 480-4111 or logon to www.onegroup.com.

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BANK ONE.

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Annual Account Statement

F JAMES SENSENBRENNER JR IRR CRT
Account number 9500091900
January 1, 2004 - December 31, 2004

BANK ONE TRUST COMPANY, N.A.
111 E WISCONSIN AVE,12TH FLOOR
MILWAUKEE, WI 53202

www.bankone.com

Your Advisor is:
LYNN E PAULL
(414) 977-2027 or (800) 926-4556

Thank you for the opportunity to serve your financial needs. We appreciate your confidence in us.

Please remember to check the Bulletin board (located at the back of your statement) for important messages from Bank One.

Don't hesitate to contact your advisor if you have any questions, comments or concerns.

05030 01163
F JAMES SENSENBRENNER JR
609 FORT WILLIAMS PKWY
ALEXANDRIA VA 22304-1813

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Holdings summary

	Value on December 31, 2004	Value on December 31, 2003	Change in value
Cash equivalents	$5,223.14		
Equities	337,508.62		
Fixed income	119,068.12		
Other	0.00		
Total holdings	$461,795.88	$444,385.65	$17,410.23
Accruals (income earned but not yet received)	$1,975.23		
Total holdings with accruals	$463,771.11		

Income summary

Income	Statement period	January 1 to December 31
Dividends (domestic/foreign/mutual fund income)	$7,445.88	$7,445.88
Interest (taxable/non-taxable)	48.57	48.57
Other income	0.00	0.00
Total income	$7,494.43	$7,494.43
Realized gain/(loss)		
	$2,791.02	$2,791.02

The income summary includes taxable and tax-exempt income for both principal and income beneficiaries, please refer to the Transaction detail for an income breakdown. These amounts represent approximate income and gain/(loss) amounts and should not be used for final Internal Revenue Service reporting.

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Market reconciliation

	Statement period	January 1 to December 31
Beginning market value	$444,385.65	$444,385.65
Receipts	16,621.46	16,621.46
Disbursements	(43,559.16)	(43,559.16)
Income	7,494.43	7,494.43
Capital gains distributions	3,687.45	3,687.45
Change in asset market value	33,166.05	33,166.05
Ending market value	$461,795.88	$461,795.88

The Market reconciliation provides a summary of all activity in the account. The Receipts and Disbursements categories may include Non-Cash Transactions such as transfers within the account, name change transactions, asset receipts and distributions, and stock split transactions. The Transaction detail section provides an itemized list of all transactions. The Transaction summary provides a summary of cash receipt and disbursement transactions.

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Transaction summary

	Income	Principal
Beginning cash balance 1/1/04	$(4,842.26)	$4,842.26
Cash receipts		
Dividends (domestic/foreign/mutual fund income)	$7,445.86	$0.00
Interest (taxable/non-taxable)	48.57	0.00
Other cash receipts	16,621.46	3,687.45
Total cash receipts	$24,115.89	$3,687.45
Cash disbursements		
Cash disbursements	$(22,219.28)	$(16,621.46)
Administrative expenses	(2,609.17)	(2,109.25)
Total cash disbursements	$(24,828.45)	$(18,730.71)
Investment transactions		
Purchases	$0.00	$(92,344.85)
Sales and maturities	0.00	108,100.67
Total investment transactions	$0.00	$15,755.82
Ending cash balance 12/31/04	$(5,554.82)	$5,554.82

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Only the Asset allocation analysis includes mutual fund holdings. The Bond quality and maturity analyses (if applicable) are displayed excluding mutual funds.

Investment objective: Growth and Income

This strategy seeks to provide long-term capital appreciation and current income by investing primarily in equity securities (60% - 80%) and secondarily in fixed income securities (20% - 40%). Principal volatility is expected to be moderate.

Asset allocation

1.1% - **Cash equivalents**

73.1% - **Equities**
73.1% - *Mutual funds*

25.8% - **Fixed income**
25.8% - *Mutual funds*

The Asset allocation may not be exactly as described in the Investment objective due to Other Asset holdings.

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Holdings detail

Cash equivalents

Very liquid assets

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
ONE GROUP PRIME MONEY MARKET FUND	5,223.140	1.000	$5,223.14	$5,223.14	$0.00	1.73%	$90.36
INCOME CASH	(5,554.820)	1.000	(5,554.82)	(5,554.82)	0.00	0.00%	0.00
PRINCIPAL CASH	5,554.820	1.000	5,554.82	5,554.82	0.00	0.00%	0.00
Total cash equivalents			$5,223.14	$5,223.14	$0.00		$90.36

Equities

Mutual funds

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
ONE GROUP DIVERSIFIED MID CAP FUND	1,815.715	19.620	$35,624.33	$30,848.99	$4,775.34	0.09%	$30.87
ONE GROUP INTERNATIONAL EQTY INDX FD	1,879.317	20.030	37,642.72	29,636.83	8,005.89	0.93%	351.43
ONE GROUP LARGE CAP GROWTH FUND	5,712.681	15.190	86,775.62	89,370.08	(2,594.46)	0.00%	0.00
ONE GROUP LARGE CAP VALUE FUND	5,427.450	15.850	86,025.08	83,258.06	2,767.02	1.12%	960.66
ONE GROUP MID CAP GROWTH FUND	1,659.690	24.050	39,915.54	34,040.23	5,875.31	0.00%	0.00
ONE GROUP MID CAP VALUE FUND	2,176.137	18.160	39,518.65	33,338.42	6,180.23	0.61%	239.38
ONE GROUP SMALL CAP GROWTH FUND	495.050	12.990	6,430.70	5,000.00	1,430.70	0.00%	0.00

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Holdings detail continued

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
ONE GROUP SMALL CAP VALUE FUND	220.839	25.240	$5,573.98	$4,222.45	$1,351.53	0.28%	$15.90
Total equities			**$337,506.62**	**$309,715.06**	**$27,791.56**		**$1,598.24**

Fixed income

Mutual funds

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Yield to maturity	Estimated annual income
ONE GROUP BOND FUND (WOBDX)	3,826.917	10.920	$41,789.93	$41,407.24	$382.69	4.93%		$2,058.68
ONE GROUP INCOME BOND FUND (HLIPX)	5,353.004	7.950	42,556.38	42,395.79	160.59	0.44%		187.36
ONE GROUP INTERMEDIATE BOND FUND (SEIFX)	3,241.812	10.710	34,719.81	34,780.41	(60.60)	4.77%		1,656.57
Total fixed income			**$119,066.12**	**$118,583.44**	**$482.68**			**$3,902.81**
Total holdings			**$461,795.88**	**$433,521.64**	**$28,274.24**			**$5,591.41**
Accruals (income earned but not yet received)			$1,975.23					
Total holdings with accruals			**$463,771.11**					

Assets identified with an asterisk (*) at the beginning of the asset name are held in the Invested Income Portfolio.

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Transaction detail

	Income	Principal
Beginning cash balance 1/1/04	$(4,842.26)	$4,842.26

Cash receipts

Mutual fund income

Date	Description	Realized gain/(loss)	Income	Principal
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 12/1/03 TO 12/31/03		$168.38	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.023697/SHARE ON 4,492.154 SHARES DUE 1/2/04		106.45	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED MID CAP FUND $0.011627/SHARE ON 2,138.588 SHARES DUE 1/2/04		24.87	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 12/1/03 TO 12/31/03		84.98	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 12/1/03 TO 12/31/03		176.65	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMEDIATE BOND FUND DIVIDEND FROM 12/1/03 TO 12/31/03		59.40	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERNATIONAL EQTY INDX FD $0.186693/SHARE ON 1,879.317 SHARES DUE 1/2/04		$350.86	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.045275/SHARE ON 4,245.245 SHARES DUE 1/2/04		192.20	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.025871/SHARE ON 2,176.137 SHARES DUE 1/2/04		56.30	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.020931/SHARE ON 261.508 SHARES DUE 1/2/04		5.47	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 1/1/04 TO 1/31/04		164.56	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 1/1/04 TO 1/31/04		81.03	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 1/1/04 TO 1/31/04		165.94	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMEDIATE BOND FUND DIVIDEND FROM 1/1/04 TO 1/31/04		56.64	

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 2/1/04 TO 2/29/04		$164.56	
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 2/1/04 TO 2/29/04		79.05	
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 2/1/04 TO 2/29/04		165.94	
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMEDIATE BOND FUND DIVIDEND FROM 2/1/04 TO 2/29/04		55.25	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 3/1/04 TO 3/31/04		176.04	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.015892/SHARE ON 4,492.154 SHARES DUE 4/1/04		71.39	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 3/1/04 TO 3/31/04		79.05	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 3/1/04 TO 3/31/04		160.59	

4745

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMEDIATE BOND FUND DIVIDEND FROM 3/1/04 TO 3/31/04		$59.40	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.040604/SHARE ON 4,245.245 SHARES DUE 4/1/04		172.37	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.015312/SHARE ON 2,176.137 SHARES DUE 4/1/04		33.32	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.021058/SHARE ON 261.506 SHARES DUE 4/1/04		5.51	
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 4/1/04 TO 4/30/04		183.69	
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 4/1/04 TO 4/30/04		84.98	
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 4/1/04 TO 4/30/04		165.94	
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMEDIATE BOND FUND DIVIDEND FROM 4/1/04 TO 4/30/04		62.16	

4746

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 5/1/04 TO 5/31/04		$179.87	
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 5/1/04 TO 5/31/04		83.00	
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 5/1/04 TO 5/31/04		165.94	
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMEDIATE BOND FUND DIVIDEND FROM 5/1/04 TO 5/31/04		60.78	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 6/1/04 TO 6/30/04		179.87	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.019605/SHARE ON 4,492.154 SHARES DUE 7/1/04		88.07	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 6/1/04 TO 6/30/04		83.00	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 6/1/04 TO 6/30/04		165.94	

4747

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMEDIATE BOND FUND DIVIDEND FROM 6/1/04 TO 6/30/04		$60.78	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.045184/SHARE ON 4,245.245 SHARES DUE 7/1/04		191.73	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.040723/SHARE ON 2,176.137 SHARES DUE 7/1/04		88.62	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.003055/SHARE ON 261.506 SHARES DUE 7/1/04		0.80	
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 7/1/04 TO 7/31/04		176.04	
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 7/1/04 TO 7/31/04		81.03	
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 7/1/04 TO 7/31/04		160.59	
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMEDIATE BOND FUND DIVIDEND FROM 7/1/04 TO 7/31/04		59.40	

4748

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 8/1/04 TO 8/31/04		$172.21	
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 8/1/04 TO 8/31/04		81.03	
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 8/1/04 TO 8/31/04		171.30	
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMEDIATE BOND FUND DIVIDEND FROM 8/1/04 TO 8/31/04		58.02	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 9/1/04 TO 9/30/04		164.56	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.018352/SHARE ON 4,319.144 SHARES DUE 10/1/04		79.26	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED MID CAP FUND $0.004987/SHARE ON 1,815.715 SHARES DUE 10/1/04		9.06	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 9/1/04 TO 9/30/04		79.05	

4749

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 9/1/04 TO 9/30/04		$160.59	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMEDIATE BOND FUND DIVIDEND FROM 9/1/04 TO 9/30/04		58.64	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.046308/SHARE ON 3,964.346 SHARES DUE 10/1/04		183.57	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.02841/SHARE ON 2,176.137 SHARES DUE 10/1/04		61.82	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.026821/SHARE ON 220.639 SHARES DUE 10/1/04		5.86	
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 10/1/04 TO 10/31/04		160.73	
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 10/1/04 TO 10/31/04		77.08	
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 10/1/04 TO 10/31/04		155.24	

4750

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMEDIATE BOND FUND DIVIDEND FROM 10/1/04 TO 10/31/04		$56.64	
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP BOND FUND DIVIDEND FROM 11/1/04 TO 11/30/04		168.38	
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP GOVERNMENT BOND FUND DIVIDEND FROM 11/1/04 TO 11/30/04		81.03	
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INCOME BOND FUND DIVIDEND FROM 11/1/04 TO 11/30/04		165.94	
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMEDIATE BOND FUND DIVIDEND FROM 11/1/04 TO 11/30/04		59.40	
Total mutual fund income			$7,445.86	$0.00
Taxable interest				
1/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 12/1/03 TO 12/31/03		4.31	
2/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 1/1/04 TO 1/31/04		2.09	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
3/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 2/1/04 TO 2/29/04		$2.04	
4/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 3/1/04 TO 3/31/04		2.22	
5/3/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 4/1/04 TO 4/30/04		2.11	
6/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 5/1/04 TO 5/31/04		2.32	
7/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 6/1/04 TO 6/30/04		2.25	
8/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 7/1/04 TO 7/31/04		6.22	
9/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 8/1/04 TO 8/31/04		7.68	
10/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 9/1/04 TO 9/30/04		8.39	

4752

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
11/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 10/1/04 TO 10/31/04		$4.17	
12/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 11/1/04 TO 11/30/04		4.77	
Total taxable interest			$48.57	$0.00
Other cash receipts				
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP SMALL CAP GROWTH FUND $0.058/SHARE ON 495.05 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $28.72 ON FEDERAL COST LT CAPITAL GAIN OF $28.72 ON STATE COST	$28.72		$28.72
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP DIVERSIFIED MID CAP FUND $1.0899/SHARE ON 1,815.715 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $1,978.91 ON FEDERAL COST LT CAPITAL GAIN OF $1,978.91 ON STATE COST	1,978.91		1,978.91
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP MID CAP VALUE FUND $0.5507/SHARE ON 2,176.137 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $1,198.44 ON FEDERAL COST LT CAPITAL GAIN OF $1,198.44 ON STATE COST	1,198.44		1,198.44

4753

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP SMALL CAP VALUE FUND $2.1798/SHARE ON 220.839 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $481.38 ON FEDERAL COST LT CAPITAL GAIN OF $481.38 ON STATE COST	$481.38		$481.38
12/31/04	CASH RECEIPT TRANSFER FROM PRINCIPAL		$16,621.46	
Total other cash receipts			$16,621.46	$3,687.45
Total cash receipts			**$24,115.89**	**$3,687.45**

Cash disbursements

Other cash disbursements

Date	Description	Income	Principal
3/31/04	CASH DISBURSEMENT PAID TO BANK ONE MILWAUKEE DDA#550462366 ACH TRANSFER TO CHECKING ACCT PAID FOR F JAMES SENSENBRENNER JR 075000019-550462366	$(5,554.82)	
6/30/04	CASH DISBURSEMENT PAID TO BANK ONE MILWAUKEE DDA#550462366 ACH TRANSFER TO CHECKING ACCT PAID FOR F JAMES SENSENBRENNER JR 075000019-550462366	(5,554.82)	

4754

Transaction detail continued

Date	Description	Income	Principal
9/30/04	CASH DISBURSEMENT PAID TO BANK ONE MILWAUKEE DDA#550462366 ACH TRANSFER TO CHECKING ACCT PAID FOR F JAMES SENSENBRENNER JR 075000019-550462366	$(5,554.82)	
12/31/04	CASH DISBURSEMENT PAID TO BANK ONE MILWAUKEE DDA#550462366 ACH TRANSFER TO CHECKING ACCT PAID FOR F JAMES SENSENBRENNER JR 075000019-550462366	(5,554.82)	
12/31/04	CASH DISBURSEMENT TRANSFER TO INCOME		$(16,621.46)
Total other cash disbursements		$(22,219.28)	$(16,621.46)
Administrative expenses			
1/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH DECEMBER MONTH END	(175.90)	(175.91)
2/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JANUARY MONTH END	(178.40)	(178.41)
3/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH FEBRUARY MONTH END	(180.75)	(180.75)
4/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH MARCH MONTH END	(177.74)	(177.75)
5/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH APRIL MONTH END	(173.91)	(173.92)

4755

Transaction detail continued

Date	Description	Income	Principal
6/10/04	CHARITABLE TAX RETURN PREP FEE COLLECTED FORMS 1041A/5227 FOR 12/31/03	$(500.00)	
6/14/04	ADMINISTRATIVE FEES COLLECTED THROUGH MAY MONTH END	(175.28)	$(175.28)
7/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JUNE MONTH END	(176.47)	(176.47)
8/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JULY MONTH END	(171.46)	(171.47)
9/13/04	ADMINISTRATIVE FEES COLLECTED THROUGH AUGUST MONTH END	(172.37)	(172.38)
10/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH SEPTEMBER MONTH END	(172.15)	(172.16)
11/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH OCTOBER MONTH END	(174.49)	(174.49)
12/13/04	ADMINISTRATIVE FEES COLLECTED THROUGH NOVEMBER MONTH END	(180.25)	(180.26)
Total administrative expenses		$(2,609.17)	$(2,109.25)
Total cash disbursements		**$(24,828.45)**	**$(18,730.71)**

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Transaction detail continued

Investment transactions

Purchases

Date	Description	Realized gain/(loss)	Income	Principal
	COMBINED PURCHASES FOR THE PERIOD 1/ 1/04 - 12/31/04 OF ONE GROUP PRIME MONEY MARKET FUND INVESTMENTS AT TAX COST: $22,344.85			$(22,344.85)
12/21/04	PURCHASED 1,807.229 SHARES OF ONE GROUP LARGE CAP GROWTH FUND TRADE DATE 12/20/04 1,807.229 SHARES AT $14.94 INVESTMENTS AT TAX COST: $27,000.00			(27,000.00)
12/21/04	PURCHASED 1,463.104 SHARES OF ONE GROUP LARGE CAP VALUE FUND TRADE DATE 12/20/04 1,463.104 SHARES AT $15.72 INVESTMENTS AT TAX COST: $23,000.00			(23,000.00)
12/21/04	PURCHASED 1,860.465 SHARES OF ONE GROUP INTERMEDIATE BOND FUND TRADE DATE 12/20/04 1,860.465 SHARES AT $10.75 INVESTMENTS AT TAX COST: $20,000.00			(20,000.00)
Total purchases			$0.00	$(92,344.85)

Sales and maturities

	COMBINED SALES FOR THE PERIOD 1/ 1/04 - 12/31/04 OF ONE GROUP PRIME MONEY MARKET FUND INVESTMENTS AT TAX COST: $-20,046.28			20,046.28

4757

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
3/31/04	SOLD 269.397 SHARES OF ONE GROUP DIVERSIFIED MID CAP FUND TRADE DATE 3/30/04 269.397 SHARES AT $18.56 INVESTMENTS AT TAX COST: $-4,577.06	$422.94		$5,000.00
7/2/04	SOLD 280.899 SHARES OF ONE GROUP LARGE CAP VALUE FUND TRADE DATE 7/1/04 280.899 SHARES AT $14.24 INVESTMENTS AT TAX COST: $-4,269.66	(269.66)		4,000.00
7/2/04	SOLD 139.082 SHARES OF ONE GROUP LARGE CAP GROWTH FUND TRADE DATE 7/1/04 139.082 SHARES AT $14.38 INVESTMENTS AT TAX COST: $-2,221.14	(221.14)		2,000.00
7/2/04	SOLD 173.01 SHARES OF ONE GROUP DIVERSIFIED EQUITY FUND TRADE DATE 7/1/04 173.01 SHARES AT $11.56 INVESTMENTS AT TAX COST: $-2,164.36	(164.36)		2,000.00
7/2/04	SOLD 40.667 SHARES OF ONE GROUP SMALL CAP VALUE FUND TRADE DATE 7/1/04 40.667 SHARES AT $24.59 INVESTMENTS AT TAX COST: $-777.55	222.45		1,000.00

4758

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
7/2/04	SOLD 53.476 SHARES OF ONE GROUP DIVERSIFIED MID CAP FUND TRADE DATE 7/1/04 53.476 SHARES AT $18.70 INVESTMENTS AT TAX COST: $-908.58	$91.44		$1,000.00
12/21/04	SOLD 4,319.144 SHARES OF ONE GROUP DIVERSIFIED EQUITY FUND TRADE DATE 12/20/04 4,319.144 SHARES AT $12.16 INVESTMENTS AT TAX COST: $-54,032.49	(1,511.70)		52,520.79
12/21/04	SOLD 1,976.285 SHARES OF ONE GROUP GOVERNMENT BOND FUND TRADE DATE 12/20/04 1,976.285 SHARES AT $10.39 INVESTMENTS AT TAX COST: $-20,000.00	533.60		20,533.60
Total sales and maturities			$0.00	$108,100.67
Total investment transactions			**$0.00**	**$15,755.82**
			Income	*Principal*
Ending cash balance 12/31/04			$(5,554.82)	$5,554.82

No pending trades.

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Although market values and prices for publicly-traded securities have been obtained from sources or third parties Bank One believes to be reliable, Bank One does not guarantee their accuracy. Certain assets may not be held by Bank One,and their reporting is at the request and for the convenience of the account owner. Certain assets, including, but not limited to, closely held, non-publicly-traded and infrequently traded securities, derivatives, partnership interests, tangible assets, and life insurance policy cash values cannot be readily priced. The valuation, pricing and/or transaction information is not independently verified by Bank One, is reflected as of the last date provided to Bank One and may not be current. Such information may not be determined by Bank One and may not have been provided to us by third parties who are not independent of the issuer or manager. Certain assets may be carried at cost.

This statement is not an official document for income tax reporting purposes.

When reviewing your Bond quality table, the percentages are rounded to zero when the percentage for a rating category is less than one percent.*

When reviewing your Holdings detail, the market value listed for each asset may not equal quantity multiplied by share price due to rounding. The Market value column will always provide the most accurate figure.

Market values noted in the Market reconciliation and Transaction detail are as of the end of the statement period. The market value on the date of the transaction may be different.

Please be aware that the information shown in the Realized gain/(loss) column (found in the Transaction detail section of your statement) is based on TAX COST, even though the assets on your statement may be carried at Book value. Please contact your Advisor if you have questions regarding this information or any part of your statement.

Bank One or its affiliates may receive and accept from time to time 12B-1 fees, shareholder servicing fees, sub-transfer agency fees, network reimbursement fees, or other fees from unaffiliated mutual funds as described in the prospectus for the fund with respect to eligible accounts. Bank One has taken steps to avoid receiving fees with respect to ineligible accounts. If Bank One inadvertently receives any such fees for ineligible accounts, such fees will be returned to the fund's distributors or other payor.

Life insurance values are shown at cash surrender value most recently reported by you or the insurance Company, except where the value shown is $1.00. If the value is $1.00, we have not received a cash surrender value.

FLORIDA CLIENTS, please note that an action for breach of trust based on matters disclosed in a trust accounting or other written report of the Trustee may be subject to a 6-month statute of limitations from the receipt of the trust accounting or other written report. Questions, please consult your attorney. (FL ST sec. 737.307)

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BANK ONE summaries Analysis Detail Bulletin board

Annual Account Statement

M L SMITH 1976 TR FBO F JAMES JR
Account number 9500069700
January 1, 2004 - December 31, 2004

BANK ONE TRUST COMPANY, N.A.
111 E WISCONSIN AVE,12TH FLOOR
MILWAUKEE, WI 53202

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Thank you for the opportunity to serve your financial needs. We appreciate your confidence in us.

Please remember to check the Bulletin board (located at the back of your statement) for important messages from Bank One.

Don't hesitate to contact your advisor if you have any questions, comments or concerns.

BANK ONE.

Holdings summary

	Value on December 31, 2004	Value on December 31, 2003	Change in value
Cash equivalents	$5,840.14		
Equities	754,718.83		
Fixed income	309,136.72		
Other	0.00		
Total holdings	**$1,069,695.69**	$1,107,622.12	**$(37,926.43)**
Accruals (income earned but not yet received)	$2,797.52		
Total holdings with accruals	$1,072,493.21		

Income summary

Income	Statement period	January 1 to December 31
Dividends (domestic/foreign/mutual fund income)	$28,709.62	$28,709.62
Interest (taxable/non-taxable)	116.00	116.00
Other income	0.00	0.00
Total income	$28,825.62	$28,825.62
Realized gain/(loss)		
	$53,137.00	$53,137.00

The income summary includes taxable and tax-exempt income for both principal and income beneficiaries, please refer to the Transaction detail for an income breakdown. These amounts represent approximate income and gain/(loss) amounts and should not be used for final Internal Revenue Service reporting.

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Market reconciliation

	Statement period	January 1 to December 31
Beginning market value	$1,107,622.12	$1,107,622.12
Receipts	1,003.30	1,003.30
Disbursements	(46,080.90)	(46,080.90)
Income	28,825.62	28,825.62
Capital gains distributions	2,184.43	2,184.43
Change in asset market value	(23,858.88)	(23,858.88)
Ending market value	$1,069,695.69	$1,069,695.69

The Market reconciliation provides a summary of all activity in the account. The Receipts and Disbursements categories may include Non-Cash Transactions such as transfers within the account, name change transactions, asset receipts and distributions, and stock split transactions. The Transaction detail section provides an itemized list of all transactions. The Transaction summary provides a summary of cash receipt and disbursement transactions.

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Transaction summary

	Income	Principal
Beginning cash balance 1/1/04	$(292.14)	$292.14
Cash receipts		
Dividends (domestic/foreign/mutual fund income)	$28,109.62	$600.00
Interest (taxable/non-taxable)	116.00	0.00
Other cash receipts	892.14	2,295.59
Total cash receipts	$29,117.76	$2,895.59
Cash disbursements		
Cash disbursements	$(22,138.55)	$(11,058.14)
Administrative expenses	(6,687.07)	(6,197.14)
Total cash disbursements	$(28,825.62)	$(17,255.28)
Investment transactions		
Purchases	$0.00	$(131,306.04)
Sales and maturities	0.00	145,373.59
Total investment transactions	$0.00	$14,067.55
Ending cash balance 12/31/04	$0.00	$0.00

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Only the Asset allocation analysis includes mutual fund holdings. The Bond quality and maturity analyses (if applicable) are displayed excluding mutual funds.

Investment objective: Tax-Free Growth and Income

This strategy seeks to provide long-term capital appreciation and tax-exempt current income by investing primarily in equity securities (60% - 80%) and secondarily in tax-exempt fixed income securities (20% - 40%). Principal volatility is expected to be moderate.

Asset allocation

- 0.5% - **Cash equivalents**
- 70.6% - **Equities**
  - 19.4% - *Health care*
  - 12.9% - *Energy*
  - 11.6% - *Capital equipment*
  - 10.9% - *Mutual funds*
  - 4.0% - *Technology*
  - 11.8% - *Other equities*
- 28.9% - **Fixed income**
  - 28.9% - *Mutual funds*

The Asset allocation may not be exactly as described in the Investment objective due to Other Asset holdings.

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Holdings detail

Cash equivalents

Very liquid assets Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
ONE GROUP PRIME MONEY MARKET FUND	5,840.140	1.000	$5,840.14	$5,840.14	$0.00	1.73%	$101.03
Total cash equivalents			$5,840.14	$5,840.14	$0.00		$101.03

Equities

Banks Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
NORTH FORK BANCORPORATION INC N Y	300.000	28.850	$8,655.00	$6,447.98	$2,207.02	3.05%	$264.00
US BANCORP DEL NEW	200.000	31.320	6,264.00	5,644.00	620.00	3.83%	240.00
WASHINGTON MUT INC	250.000	42.280	10,570.00	10,687.50	(117.50)	4.26%	450.00
Total banks			$25,489.00	$22,779.48	$2,709.52		$954.00
Capital equipment							
GENERAL ELEC CO	3,400.000	36.500	124,100.00	10,731.25	113,368.75	2.41%	2,992.00
Consumer cyclical							
COMCAST CORP NEW CL A SPL	300.000	32.840	9,852.00	9,009.00	843.00	0.00%	0.00
Consumer non-durable							
PEPSICO INC	200.000	52.200	10,440.00	10,208.00	232.00	1.76%	184.00
Energy							
BP P L C SPONSORED ADR	352.000	58.400	20,556.80	3,960.83	16,595.97	2.85%	585.02

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Holdings detail continued

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
EXXON MOBIL CORP	2,300.000	51.260	$117,898.00	$15,905.94	$101,992.06	2.11%	$2,484.00
Total energy			$138,454.80	$19,866.77	$118,588.03		$3,069.02
Finance							
ALLSTATE CORP	200.000	51.720	10,344.00	10,096.00	248.00	2.17%	224.00
CITIGROUP INC	300.000	48.180	14,454.00	12,621.00	1,833.00	3.32%	480.00
Total finance			$24,798.00	$22,717.00	$2,081.00		$704.00
Health care							
MERCK & CO INC	1,000.000	32.140	32,140.00	4,321.69	27,818.31	4.73%	1,520.00
PFIZER INC	6,500.000	26.890	174,785.00	11,415.85	163,369.15	2.83%	4,940.00
Total health care			$206,925.00	$15,737.54	$191,187.46		$6,460.00
Industrial commodities							
DU PONT E I DE NEMOURS & CO	600.000	49.050	29,430.00	7,325.00	22,105.00	2.85%	840.00
Mutual funds							
ONE GROUP INTERNATIONAL EQTY INDX FD	883.117	20.030	17,688.83	10,200.00	7,488.83	0.93%	165.14
ONE GROUP MID CAP GROWTH FUND	1,551.831	24.050	37,321.54	25,000.00	12,321.54	0.00%	0.00
ONE GROUP MID CAP VALUE FUND	2,214.651	18.160	40,218.06	26,000.00	14,218.06	0.61%	243.61
ONE GROUP SMALL CAP GROWTH FUND	862.069	12.990	11,198.28	7,000.00	4,198.28	0.00%	0.00
ONE GROUP SMALL CAP VALUE FUND	419.664	25.240	10,592.32	7,000.00	3,592.32	0.28%	30.22
Total mutual funds			$117,019.03	$75,200.00	$41,819.03		$438.97

Holdings detail continued

Other utilities Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
DOMINION RES INC VA NEW	150.000	67.740	$10,161.00	$9,907.50	$253.50	3.93%	$399.00
Retail							
HOME DEPOT INC	250.000	42.740	10,685.00	10,720.00	(35.00)	0.80%	85.00
KOHLS CORP	100.000	49.170	4,917.00	4,902.00	15.00	0.00%	0.00
Total retail			$15,602.00	$15,622.00	$(20.00)		$85.00
Technology							
CISCO SYS INC	900.000	19.320	17,388.00	8,393.75	8,994.25	0.00%	0.00
INTERNATIONAL BUSINESS MACHS CORP	200.000	98.580	19,716.00	10,063.75	9,652.25	0.73%	144.00
MICROSOFT CORP	200.000	26.720	5,344.00	5,212.00	132.00	1.20%	64.00
Total technology			$42,448.00	$23,669.50	$18,778.50		$208.00
Total equities			**$754,718.83**	**$242,773.04**	**$511,945.79**		**$16,333.99**

Fixed income

Mutual funds Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Yield to maturity	Estimated annual income
ONE GROUP INTERMEDIATE TAX-FREE BOND FUND (HLTIX)	17,650.075	11.250	$198,563.34	$180,500.00	$18,063.34	3.91%		$7,766.03
ONE GROUP MUNICIPAL INCOME FUND (HLTAX)	11,180.322	9.890	110,573.38	108,499.99	2,073.39	4.25%		4,695.74
Total fixed income			**$309,136.72**	**$288,999.99**	**$20,136.73**			**$12,461.77**
Total holdings			**$1,069,695.69**	**$537,613.17**	**$532,082.52**			**$28,896.79**

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Holdings detail continued

Accruals (income earned but not yet received)	$2,797.52
Total holdings with accruals	**$1,072,493.21**

Assets identified with an asterisk (*) at the beginning of the asset name are held in the Invested Income Portfolio.

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Transaction detail

	Income	Principal
Beginning cash balance 1/1/04	$(292.14)	$292.14

Cash receipts

Foreign dividends

Date	Description	Realized gain/(loss)	Income	Principal
3/15/04	CASH RECEIPT CASH DIVIDEND BP P L C SPONSORED ADR .45/SHR DUE 3/15/04 FOREIGN CASH DIVIDEND		$158.40	
6/7/04	CASH RECEIPT OF DIVIDEND EARNED ON BP P L C SPONSORED ADR $0.405/SHARE ON 352 SHARES DUE 6/7/04 FOREIGN CASH DIVIDEND		142.56	
9/7/04	CASH RECEIPT CASH DIVIDEND BP P L C SPONSORED ADR .426/SHR DUE 9/7/04		149.95	
12/6/04	CASH RECEIPT CASH DIVIDEND BP P L C SPONSORED ADR .426/SHR DUE 12/6/04		149.95	
Total foreign dividends			$600.86	$0.00

Transaction detail continued

Domestic dividends

Date	Description	Realized gain/(loss)	Income	Principal
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON VIACOM INC CL B $0.06/SHARE ON 150 SHARES DUE 1/1/04		$9.00	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON MERCK & CO INC $0.37/SHARE ON 1,700 SHARES DUE 1/2/04		629.00	
1/26/04	CASH RECEIPT OF DIVIDEND EARNED ON GENERAL ELEC CO $0.20/SHARE ON 3,600 SHARES DUE 1/26/04		720.00	
2/13/04	CASH RECEIPT OF DIVIDEND EARNED ON WASHINGTON MUT INC $0.42/SHARE ON 125 SHARES DUE 2/13/04		52.50	
2/17/04	CASH RECEIPT OF DIVIDEND EARNED ON NORTH FORK BANCORPORATION INC N Y $0.30/SHARE ON 200 SHARES DUE 2/17/04		60.00	
2/27/04	CASH RECEIPT OF DIVIDEND EARNED ON CITIGROUP INC $0.40/SHARE ON 150 SHARES DUE 2/27/04		60.00	
3/5/04	CASH RECEIPT OF DIVIDEND EARNED ON PFIZER INC $0.17/SHARE ON 7,389 SHARES DUE 3/5/04		1,256.13	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
3/10/04	CASH RECEIPT OF DIVIDEND EARNED ON EXXON MOBIL CORP $0.25/SHARE ON 2,300 SHARES DUE 3/10/04		$575.00	
3/10/04	CASH RECEIPT OF DIVIDEND EARNED ON INTERNATIONAL BUSINESS MACHS CORP $0.16/SHARE ON 200 SHARES DUE 3/10/04		32.00	
3/15/04	CASH RECEIPT OF DIVIDEND EARNED ON DU PONT E I DE NEMOURS & CO $0.35/SHARE ON 600 SHARES DUE 3/13/04		210.00	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON MERCK & CO INC $0.37/SHARE ON 1,700 SHARES DUE 4/1/04		629.00	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON VIACOM INC CL B $0.06/SHARE ON 150 SHARES DUE 4/1/04		9.00	
4/26/04	CASH RECEIPT OF DIVIDEND EARNED ON GENERAL ELEC CO $0.20/SHARE ON 3,600 SHARES DUE 4/26/04		720.00	
5/14/04	CASH RECEIPT OF DIVIDEND EARNED ON WASHINGTON MUT INC $0.43/SHARE ON 125 SHARES DUE 5/14/04		53.75	
5/17/04	CASH RECEIPT OF DIVIDEND EARNED ON NORTH FORK BANCORPORATION INC N Y $0.30/SHARE ON 200 SHARES DUE 5/17/04		60.00	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
5/28/04	CASH RECEIPT OF DIVIDEND EARNED ON CITIGROUP INC $0.40/SHARE ON 150 SHARES DUE 5/28/04		$60.00	
6/4/04	CASH RECEIPT OF DIVIDEND EARNED ON PFIZER INC $0.17/SHARE ON 7,389 SHARES DUE 6/4/04		1,256.13	
6/10/04	CASH RECEIPT OF DIVIDEND EARNED ON EXXON MOBIL CORP $0.27/SHARE ON 2,300 SHARES DUE 6/10/04		621.00	
6/10/04	CASH RECEIPT OF DIVIDEND EARNED ON INTERNATIONAL BUSINESS MACHS CORP $0.18/SHARE ON 200 SHARES DUE 6/10/04		36.00	
6/14/04	CASH RECEIPT OF DIVIDEND EARNED ON DU PONT E I DE NEMOURS & CO $0.35/SHARE ON 600 SHARES DUE 6/12/04		210.00	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON MBNA CORP $0.12/SHARE ON 200 SHARES DUE 7/1/04		24.00	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON MERCK & CO INC $0.37/SHARE ON 1,500 SHARES DUE 7/1/04		555.00	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON VIACOM INC CL B $0.06/SHARE ON 150 SHARES DUE 7/1/04		9.00	

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
7/15/04	CASH RECEIPT OF DIVIDEND EARNED ON US BANCORP DEL NEW $0.24/SHARE ON 200 SHARES DUE 7/15/04		$48.00	
7/26/04	CASH RECEIPT OF DIVIDEND EARNED ON GENERAL ELEC CO $0.20/SHARE ON 3,400 SHARES DUE 7/26/04		680.00	
8/13/04	CASH RECEIPT OF DIVIDEND EARNED ON WASHINGTON MUT INC $0.44/SHARE ON 125 SHARES DUE 8/13/04		55.00	
8/16/04	CASH RECEIPT OF DIVIDEND EARNED ON NORTH FORK BANCORPORATION INC N Y $0.30/SHARE ON 200 SHARES DUE 8/16/04		60.00	
8/27/04	CASH RECEIPT OF DIVIDEND EARNED ON CITIGROUP INC $0.40/SHARE ON 150 SHARES DUE 8/27/04		60.00	
9/3/04	CASH RECEIPT OF DIVIDEND EARNED ON PFIZER INC $0.17/SHARE ON 6,989 SHARES DUE 9/3/04		1,188.13	
9/7/04	CASH RECEIPT OF DIVIDEND EARNED ON WAL MART STORES INC $0.13/SHARE ON 200 SHARES DUE 9/7/04		26.00	
9/10/04	CASH RECEIPT OF DIVIDEND EARNED ON EXXON MOBIL CORP $0.27/SHARE ON 2,300 SHARES DUE 9/10/04		621.00	

BANK ONE.

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
9/10/04	CASH RECEIPT OF DIVIDEND EARNED ON INTERNATIONAL BUSINESS MACHS CORP $0.18/SHARE ON 200 SHARES DUE 9/10/04		$36.00	
9/13/04	CASH RECEIPT OF DIVIDEND EARNED ON DU PONT E I DE NEMOURS & CO $0.35/SHARE ON 600 SHARES DUE 9/11/04		210.00	
9/14/04	CASH RECEIPT OF DIVIDEND EARNED ON MICROSOFT CORP $0.08/SHARE ON 200 SHARES DUE 9/14/04		16.00	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON MBNA CORP $0.12/SHARE ON 200 SHARES DUE 10/1/04		24.00	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON MERCK & CO INC $0.38/SHARE ON 1,500 SHARES DUE 10/1/04		570.00	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON VIACOM INC CL B $0.06/SHARE ON 150 SHARES DUE 10/1/04		9.00	
10/15/04	CASH RECEIPT OF DIVIDEND EARNED ON US BANCORP DEL NEW $0.24/SHARE ON 200 SHARES DUE 10/15/04		48.00	
10/25/04	CASH RECEIPT OF DIVIDEND EARNED ON GENERAL ELEC CO $0.20/SHARE ON 3,400 SHARES DUE 10/25/04		680.00	

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
11/15/04	CASH RECEIPT OF DIVIDEND EARNED ON NORTH FORK BANCORPORATION INC N Y $0.33/SHARE ON 200 SHARES DUE 11/15/04		$66.00	
11/15/04	CASH RECEIPT OF DIVIDEND EARNED ON WASHINGTON MUT INC $0.45/SHARE ON 125 SHARES DUE 11/15/04		56.25	
11/24/04	CASH RECEIPT OF DIVIDEND EARNED ON CITIGROUP INC $0.40/SHARE ON 150 SHARES DUE 11/24/04		60.00	
12/2/04	SPECIAL CASH DIVIDEND 200 SHARES/PAR VALUE OF MICROSOFT CORP PAYABLE AT $3.00 DUE 12/02/04 TOTAL INCOME $600.00			$600.00
12/2/04	CASH RECEIPT OF DIVIDEND EARNED ON MICROSOFT CORP $0.08/SHARE ON 200 SHARES DUE 12/2/04		16.00	
12/3/04	CASH RECEIPT OF DIVIDEND EARNED ON PFIZER INC $0.17/SHARE ON 6,989 SHARES DUE 12/3/04		1,188.13	
12/10/04	CASH RECEIPT OF DIVIDEND EARNED ON EXXON MOBIL CORP $0.27/SHARE ON 2,300 SHARES DUE 12/10/04		621.00	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
12/10/04	CASH RECEIPT OF DIVIDEND EARNED ON INTERNATIONAL BUSINESS MACHS CORP $0.18/SHARE ON 200 SHARES DUE 12/10/04		$36.00	
12/14/04	CASH RECEIPT OF DIVIDEND EARNED ON DU PONT E I DE NEMOURS & CO $0.35/SHARE ON 600 SHARES DUE 12/14/04		210.00	
12/16/04	CASH RECEIPT OF DIVIDEND EARNED ON HOME DEPOT INC $0.085/SHARE ON 250 SHARES DUE 12/16/04		21.25	
12/20/04	CASH RECEIPT OF DIVIDEND EARNED ON DOMINION RES INC VA NEW $0.665/SHARE ON 150 SHARES DUE 12/20/04		99.75	
Total domestic dividends			$14,552.02	$600.00
Mutual fund income				
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP EQUITY INCOME FUND $0.021224/SHARE ON 114.152 SHARES DUE 1/2/04		2.42	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 12/1/03 TO 12/31/03		670.70	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERNATIONAL EQTY INDX FD $0.186693/SHARE ON 883.117 SHARES DUE 1/2/04		164.87	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.045275/SHARE ON 395.747 SHARES DUE 1/2/04		$17.92	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.025871/SHARE ON 2,214.651 SHARES DUE 1/2/04		57.30	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 12/1/03 TO 12/31/03		391.31	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.020931/SHARE ON 419.664 SHARES DUE 1/2/04		8.78	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP EQUITY INCOME FUND $0.016007/SHARE ON 114.152 SHARES DUE 2/2/04		1.83	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 1/1/04 TO 1/31/04		653.05	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 1/1/04 TO 1/31/04		391.31	
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP EQUITY INCOME FUND $0.032464/SHARE ON 114.152 SHARES DUE 3/1/04		3.71	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 2/1/04 TO 2/29/04		$635.40	
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 2/1/04 TO 2/29/04		368.95	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP EQUITY INCOME FUND $0.002585/SHARE ON 114.152 SHARES DUE 4/1/04		0.30	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 3/1/04 TO 3/31/04		635.40	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.040604/SHARE ON 395.747 SHARES DUE 4/1/04		16.07	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.015312/SHARE ON 2,214.651 SHARES DUE 4/1/04		33.91	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 3/1/04 TO 3/31/04		357.77	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.021058/SHARE ON 419.664 SHARES DUE 4/1/04		8.84	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP EQUITY INCOME FUND $0.019586/SHARE ON 114.152 SHARES DUE 5/3/04		$2.24	
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 4/1/04 TO 4/30/04		653.05	
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 4/1/04 TO 4/30/04		335.41	
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP EQUITY INCOME FUND $0.024717/SHARE ON 114.152 SHARES DUE 6/1/04		2.82	
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 5/1/04 TO 5/31/04		653.05	
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 5/1/04 TO 5/31/04		357.77	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP EQUITY INCOME FUND $0.017108/SHARE ON 114.152 SHARES DUE 7/1/04		1.95	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 6/1/04 TO 6/30/04		653.05	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.045164/SHARE ON 395.747 SHARES DUE 7/1/04		$17.87	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.040723/SHARE ON 2,214.651 SHARES DUE 7/1/04		90.19	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 6/1/04 TO 6/30/04		380.13	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.003055/SHARE ON 419.664 SHARES DUE 7/1/04		1.28	
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP EQUITY INCOME FUND $0.01452/SHARE ON 114.152 SHARES DUE 8/2/04		1.66	
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 7/1/04 TO 7/31/04		653.05	
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 7/1/04 TO 7/31/04		368.95	
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP EQUITY INCOME FUND $0.03648/SHARE ON 114.152 SHARES DUE 9/1/04		4.16	

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 8/1/04 TO 8/31/04		$635.40	
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 8/1/04 TO 8/31/04		413.67	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP EQUITY INCOME FUND $0.020141/SHARE ON 114.152 SHARES DUE 10/1/04		2.30	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 9/1/04 TO 9/30/04		635.40	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.046306/SHARE ON 395.747 SHARES DUE 10/1/04		18.33	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.02841/SHARE ON 2,214.651 SHARES DUE 10/1/04		62.92	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 9/1/04 TO 9/30/04		436.03	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.026621/SHARE ON 419.664 SHARES DUE 10/1/04		11.17	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP EQUITY INCOME FUND $0.01915/SHARE ON 114.152 SHARES DUE 11/1/04		$2.19	
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 10/1/04 TO 10/31/04		635.40	
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 10/1/04 TO 10/31/04		447.21	
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 11/1/04 TO 11/30/04		635.40	
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 11/1/04 TO 11/30/04		424.85	
Total mutual fund income			$12,956.74	$0.00
Taxable interest				
1/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 12/1/03 TO 12/31/03		11.40	
2/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 1/1/04 TO 1/31/04		11.22	

4788

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
3/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 2/1/04 TO 2/29/04		$10.63	
4/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 3/1/04 TO 3/31/04		10.08	
5/3/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 4/1/04 TO 4/30/04		6.94	
6/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 5/1/04 TO 5/31/04		7.20	
7/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 6/1/04 TO 6/30/04		7.95	
8/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 7/1/04 TO 7/31/04		9.73	
9/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 8/1/04 TO 8/31/04		12.03	
10/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 9/1/04 TO 9/30/04		8.93	

4789

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
11/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 10/1/04 TO 10/31/04		$8.81	
12/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 11/1/04 TO 11/30/04		11.08	
Total taxable interest			$116.00	$0.00
Other cash receipts				
1/13/04	CASH RECEIPT TRANSFER FROM PRINCIPAL		292.14	
6/17/04	CASH RECEIPT CLASS ACTION SETTLEMENT CUSIP #151313103 CLASS ACTION PROCEEDS FROM CENDANT CORP SECURITIES LITIGATION PROCEEDS RCVD FROM CLOSED ACCOUNT-9572036610			$111.16
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP SMALL CAP GROWTH FUND $0.058/SHARE ON 862.069 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $50.01 ON FEDERAL COST LT CAPITAL GAIN OF $50.01 ON STATE COST	$50.01		50.01

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP MID CAP VALUE FUND $0.5507/SHARE ON 2,214.651 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $1,219.65 ON FEDERAL COST LT CAPITAL GAIN OF $1,219.65 ON STATE COST	$1,219.65		$1,219.65
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP SMALL CAP VALUE FUND $2.1798/SHARE ON 419.664 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $914.77 ON FEDERAL COST LT CAPITAL GAIN OF $914.77 ON STATE COST	914.77		914.77
12/21/04	CASH RECEIPT TRANSFER FROM PRINCIPAL MICROSOFT CORP PRINCIPAL TO INCOME TRANSFER - MICROSOFT DIVIDEND		$800.00	
Total other cash receipts			$892.14	$2,295.59
Total cash receipts			$29,117.76	$2,895.59

Cash disbursements

Other cash disbursements

Date	Description	Income	Principal
1/13/04	CASH DISBURSEMENT TRANSFER TO INCOME		$(292.14)

4791

Transaction detail continued

Date	Description	Income	Principal
3/10/04	CASH DISBURSEMENT PAID TO BANK ONE MILWAUKEE DDA#550462366 ACH TRANSFER TO CHECKING ACCT PAID FOR F JAMES SENSENBRENNER JR 076000019-550462366	$(5,740.27)	
3/15/04	CASH DISBURSEMENT PAID TO 10% TAX ON FOREIGN CASH DIVIDEND FOREIGN TAXES BP P L C SPONSORED ADR C#055622104 TAX ON FOREIGN CASH DIVIDEND	(15.84)	
4/5/04	CASH DISBURSEMENT PAID TO U S TREASURY FIDUCIARY FEDERAL INCOME TAX ***WITX TAX DUE ON FORM 1041 FOR CALENDAR YR RETUR		$(4,773.00)
4/5/04	CASH DISBURSEMENT PAID TO WISCONSIN DEPT OF REVENUE FIDUCIARY STATE INCOME TAX ***WITX TAX DUE ON STATE FIDUCIARY CALENDAR YR RTN		(678.00)
4/8/04	CASH DISBURSEMENT PAID TO U S TREASURY FIDUCIARY EST FED INCOME TAX ***WITX FEDERAL ESTIMATED TAX		(19.00)
4/8/04	CASH DISBURSEMENT PAID TO WISCONSIN DEPT OF REVENUE FIDUCIARY EST STATE TAX ***WITX INSTALLMENT ON STATE FIDUCIARY INCOME TAX		(680.00)

4792

Transaction detail continued

Date	Description	Income	Principal
6/10/04	CASH DISBURSEMENT PAID TO BANK ONE MILWAUKEE DDA#550462366 ACH TRANSFER TO CHECKING ACCT PAID FOR F JAMES SENSENBRENNER JR 075000019-550462366	$(4,959.30)	
9/9/04	CASH DISBURSEMENT PAID TO U S TREASURY FIDUCIARY EST FED INCOME TAX ***WITX FEDERAL ESTIMATED TAX		$(3,569.00)
9/10/04	CASH DISBURSEMENT PAID TO BANK ONE MILWAUKEE DDA#550462366 ACH TRANSFER TO CHECKING ACCT PAID FOR F JAMES SENSENBRENNER JR 075000019-550462366	(5,423.28)	
12/10/04	CASH DISBURSEMENT PAID TO BANK ONE MILWAUKEE DDA#550462366 ACH TRANSFER TO CHECKING ACCT PAID FOR F JAMES SENSENBRENNER JR 075000019-550462366	(5,571.20)	
12/21/04	CASH DISBURSEMENT TRANSFER TO INCOME MICROSOFT CORP PRINCIPAL TO INCOME TRANSFER - MICROSOFT DIVIDEND		(600.00)

4793

Transaction detail continued

Date	Description	Income	Principal
12/28/04	CASH DISBURSEMENT PAID TO WISCONSIN DEPT OF REVENUE FIDUCIARY EST STATE TAX ***WITX INSTALLMENT ON STATE FIDUCIARY INCOME TAX		$(447.00)
12/31/04	CASH DISBURSEMENT PAID TO BANK ONE MILWAUKEE DDA#550462366 ACH TRANSFER TO CHECKING ACCT PAID FOR F JAMES SENSENBRENNER JR 075000019-550482366	$(428.66)	
Total other cash disbursements		$(22,138.55)	$(11,058.14)
Administrative expenses			
1/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH DECEMBER MONTH END	(521.76)	(521.77)
2/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JANUARY MONTH END	(532.40)	(532.40)
3/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH FEBRUARY MONTH END	(534.52)	(534.53)
4/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH MARCH MONTH END	(520.66)	(520.66)
5/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH APRIL MONTH END	(516.37)	(516.38)
6/10/04	FIDUCIARY TAX RETURN PREP COLLECTED 2003 FORMS 1041/2	(490.00)	

4794

Transaction detail continued

Date	Description	Income	Principal
6/14/04	ADMINISTRATIVE FEES COLLECTED THROUGH MAY MONTH END	$(518.85)	$(518.85)
7/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JUNE MONTH END	(518.95)	(518.95)
8/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JULY MONTH END	(512.07)	(512.08)
9/13/04	ADMINISTRATIVE FEES COLLECTED THROUGH AUGUST MONTH END	(513.71)	(513.72)
10/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH SEPTEMBER MONTH END	(503.21)	(503.21)
11/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH OCTOBER MONTH END	(502.23)	(502.24)
12/13/04	ADMINISTRATIVE FEES COLLECTED THROUGH NOVEMBER MONTH END	(502.34)	(502.35)
Total administrative expenses		$(6,687.07)	$(6,197.14)
Total cash disbursements		**$(28,825.62)**	**$(17,255.28)**

Investment transactions

Purchases

Date	Description	Realized gain/(loss)	Income	Principal
	COMBINED PURCHASES FOR THE PERIOD 1/ 1/04 - 12/31/04 OF ONE GROUP PRIME MONEY MARKET FUND INVESTMENTS AT TAX COST: $42,372.79			$(42,372.79)

4795

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
6/2/04	PURCHASED 200 SHARES OF MBNA CORP TRADE DATE 5/27/04 PURCHASED THROUGH SPEAR, LEEDS & KELLOGG PAID $6.00 BROKERAGE 200 SHARES AT $25.48 INVESTMENTS AT TAX COST: $5,102.00			$(5,102.00)
6/2/04	PURCHASED 200 SHARES OF US BANCORP DEL NEW TRADE DATE 5/27/04 PURCHASED THROUGH SPEAR, LEEDS & KELLOGG PAID $6.00 BROKERAGE 200 SHARES AT $28.19 INVESTMENTS AT TAX COST: $5,644.00			(5,644.00)
6/2/04	PURCHASED 200 SHARES OF MICROSOFT CORP TRADE DATE 5/27/04 PURCHASED THROUGH SPEAR, LEEDS & KELLOGG PAID $6.00 BROKERAGE 200 SHARES AT $26.03 INVESTMENTS AT TAX COST: $5,212.00			(5,212.00)

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
5/2/04	PURCHASED 200 SHARES OF WAL MART STORES INC TRADE DATE 5/27/04 PURCHASED THROUGH SPEAR, LEEDS & KELLOGG PAID $8.00 BROKERAGE 200 SHARES AT $55.93 INVESTMENTS AT TAX COST: $11,192.00			$(11,192.00)
11/24/04	PURCHASED 250 SHARES OF HOME DEPOT INC TRADE DATE 11/19/04 PURCHASED THROUGH SPEAR, LEEDS & KELLOGG PAID $7.50 BROKERAGE 250 SHARES AT $42.85 INVESTMENTS AT TAX COST: $10,720.00			(10,720.00)
11/24/04	PURCHASED 200 SHARES OF ALLSTATE CORP TRADE DATE 11/19/04 PURCHASED THROUGH SPEAR, LEEDS & KELLOGG PAID $8.00 BROKERAGE 200 SHARES AT $50.45 INVESTMENTS AT TAX COST: $10,098.00			(10,098.00)

4797

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
11/24/04	PURCHASED 200 SHARES OF PEPSICO INC TRADE DATE 11/19/04 PURCHASED THROUGH SPEAR, LEEDS & KELLOGG PAID $8.00 BROKERAGE 200 SHARES AT $51.01 INVESTMENTS AT TAX COST: $10,208.00			$(10,208.00)
11/24/04	PURCHASED 300 SHARES OF COMCAST CORP NEW CL A SPL TRADE DATE 11/19/04 PURCHASED THROUGH SPEAR, LEEDS & KELLOGG PAID $9.00 BROKERAGE 300 SHARES AT $30.00 INVESTMENTS AT TAX COST: $9,009.00			(9,009.00)
11/24/04	PURCHASED 125 SHARES OF WASHINGTON MUT INC TRADE DATE 11/19/04 PURCHASED THROUGH SPEAR, LEEDS & KELLOGG PAID $3.75 BROKERAGE 125 SHARES AT $40.40 INVESTMENTS AT TAX COST: $5,053.75			(5,053.75)
11/24/04	PURCHASED 150 SHARES OF CITIGROUP INC TRADE DATE 11/19/04 PURCHASED THROUGH SPEAR, LEEDS & KELLOGG PAID $4.50 BROKERAGE 150 SHARES AT $45.23 INVESTMENTS AT TAX COST: $6,789.00			(6,789.00)

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
11/24/04	PURCHASED 150 SHARES OF DOMINION RES INC VA NEW TRADE DATE 11/19/04 PURCHASED THROUGH SPEAR, LEEDS & KELLOGG PAID $4.50 BROKERAGE 150 SHARES AT $66.02 INVESTMENTS AT TAX COST: $9,907.50			$(9,907.50)
Total purchases			$0.00	$(131,306.04)
Sales and maturities				
	COMBINED SALES FOR THE PERIOD 1/ 1/04 - 12/31/04 OF ONE GROUP PRIME MONEY MARKET FUND INVESTMENTS AT TAX COST: $-55,485.91			55,485.91
6/2/04	SOLD 200 SHARES OF MERCK & CO INC TRADE DATE 5/27/04 SOLD THROUGH SPEAR, LEEDS & KELLOGG PAID $8.00 BROKERAGE PAID $0.22 SEC FEE 200 SHARES AT $46.91 INVESTMENTS AT TAX COST: $-864.34	$8,511.44		9,375.78

4799

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
6/2/04	SOLD 400 SHARES OF PFIZER INC TRADE DATE 5/27/04 SOLD THROUGH SPEAR, LEEDS & KELLOGG PAID $12.00 BROKERAGE PAID $0.33 SEC FEE 400 SHARES AT $35.34 INVESTMENTS AT TAX COST: $-1,479.75	$12,643.92		$14,123.67
6/2/04	SOLD 200 SHARES OF GENERAL ELEC CO TRADE DATE 5/27/04 SOLD THROUGH SPEAR, LEEDS & KELLOGG PAID $6.00 BROKERAGE PAID $0.15 SEC FEE 200 SHARES AT $31.19 INVESTMENTS AT TAX COST: $-631.25	5,600.60		6,231.85
11/22/04	SOLD 395.747 SHARES OF ONE GROUP LARGE CAP VALUE FUND TRADE DATE 11/19/04 395.747 SHARES AT $15.24 INVESTMENTS AT TAX COST: $-4,554.35	1,476.83		6,031.18
11/22/04	SOLD 256.191 SHARES OF ONE GROUP LARGE CAP GROWTH FUND TRADE DATE 11/19/04 256.191 SHARES AT $14.60 INVESTMENTS AT TAX COST: $-2,999.99	740.40		3,740.39

4800

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
11/22/04	SOLD 114.152 SHARES OF ONE GROUP EQUITY INCOME FUND TRADE DATE 11/19/04 114.152 SHARES AT $17.28 INVESTMENTS AT TAX COST: $-1,526.58	$445.97		$1,972.55
11/24/04	SOLD 200 SHARES OF WAL MART STORES INC TRADE DATE 11/19/04 SOLD THROUGH SPEAR, LEEDS & KELLOGG PAID $6.00 BROKERAGE PAID $0.26 SEC FEE 200 SHARES AT $55.21 INVESTMENTS AT TAX COST: $-11,192.00	(156.26)		11,035.74
11/24/04	SOLD 489 SHARES OF PFIZER INC TRADE DATE 11/19/04 SOLD THROUGH SPEAR, LEEDS & KELLOGG PAID $14.67 BROKERAGE PAID $0.32 SEC FEE 489 SHARES AT $27.31 INVESTMENTS AT TAX COST: $-1,809.00	11,530.60		13,339.60

4801

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
11/24/04	SOLD 150 SHARES OF VIACOM INC CL B TRADE DATE 11/18/04 SOLD THROUGH SPEAR, LEEDS & KELLOGG PAID $4.50 BROKERAGE PAID $0.13 SEC FEE 150 SHARES AT $34.86 INVESTMENTS AT TAX COST: $-6,615.00	$(1,390.63)		$5,224.37
11/24/04	SOLD 500 SHARES OF MERCK & CO INC TRADE DATE 11/19/04 SOLD THROUGH SPEAR, LEEDS & KELLOGG PAID $15.00 BROKERAGE PAID $0.32 SEC FEE 500 SHARES AT $27.06 INVESTMENTS AT TAX COST: $-2,160.85	11,353.83		13,514.68
11/24/04	SOLD 200 SHARES OF MBNA CORP TRADE DATE 11/19/04 SOLD THROUGH SPEAR, LEEDS & KELLOGG PAID $6.00 BROKERAGE PAID $0.13 SEC FEE 200 SHARES AT $26.52 INVESTMENTS AT TAX COST: $-5,102.00	195.87		5,297.87
Total sales and maturities			$0.00	$145,373.59
Total investment transactions			**$0.00**	**$14,067.55**

4802

Transaction detail continued

Other investment transactions (non-cash)

Date	Description	Income	Principal
11/16/04	STOCK SPLIT 3 FOR 2 STOCK SPLIT ON NORTH FORK BANCORPORATION INC N Y DUE 11/15/04 100 ADDITIONAL SHARES RECEIVED		
Total other investment transactions (non-cash)		$0.00	$0.00

	Income	Principal
Ending cash balance 12/31/04	$0.00	$0.00

No pending trades.

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BANK ONE.

Although market values and prices for publicly-traded securities have been obtained from sources or third parties Bank One believes to be reliable, Bank One does not guarantee their accuracy. Certain assets may not be held by Bank One,and their reporting is at the request and for the convenience of the account owner. Certain assets, including, but not limited to, closely held, non-publicly-traded and infrequently traded securities, derivatives, partnership interests, tangible assets, and life insurance policy cash values cannot be readily priced. The valuation, pricing and/or transaction information is not independently verified by Bank One, is reflected as of the last date provided to Bank One and may not be current. Such information may not be determined by Bank One and may not have been provided to us by third parties who are not independent of the issuer or manager. Certain assets may be carried at cost.

This statement is not an official document for income tax reporting purposes.

When reviewing your Bond quality table, the percentages are rounded to zero when the percentage for a rating category is less than one percent.

When reviewing your Holdings detail, the market value listed for each asset may not equal quantity multiplied by share price due to rounding. The Market value column will always provide the most accurate figure.

Market values noted in the Market reconciliation and Transaction detail are as of the end of the statement period. The market value on the date of the transaction may be different.

Please be aware that the information shown in the Realized gain/(loss) column (found in the Transaction detail section of your statement) is based on TAX COST, even though the assets on your statement may be carried at Book value. Please contact your Advisor if you have questions regarding this information or any part of your statement.

Bank One or its affiliates may receive and accept from time to time 12B-1 fees, shareholder servicing fees, sub-transfer agency fees, network reimbursement fees, or other fees from unaffiliated mutual funds as described in the prospectus for the fund with respect to eligible accounts. Bank One has taken steps to avoid receiving fees with respect to ineligible accounts. If Bank One inadvertently receives any such fees for ineligible accounts, such fees will be returned to the fund's distributors or other payor.

Life insurance values are shown at cash surrender value most recently reported by you or the Insurance Company, except where the value shown is $1.00. If the value is $1.00, we have not received a cash surrender value.

FLORIDA CLIENTS, please note that an action for breach of trust based on matters disclosed in a trust accounting or other written report of the Trustee may be subject to a 6-month statute of limitations from the receipt of the trust accounting or other written report. Questions, please consult your attorney. (FL ST sec. 737.307)

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BANK ONE.

BANK ONE

Annual Account Statement

MARGARET L SMITH 96 EXEMPT F JAMES
Account number 9572226310
January 1, 2004 - December 31, 2004

BANK ONE TRUST COMPANY, N.A.
111 E WISCONSIN AVE,12TH FLOOR
MILWAUKEE, WI 53202

www.bankone.com

Your Advisor is:
LYNN E PAULL
(414) 977-2027 or (800) 926-4556

Thank you for the opportunity to serve your financial needs. We appreciate your confidence in us.

Please remember to check the Bulletin board (located at the back of your statement) for important messages from Bank One.

Don't hesitate to contact your advisor if you have any questions, comments or concerns.

05030 01900
F JAMES SENSENBRENNER JR
609 FORT WILLIAMS PKWY
ALEXANDRIA VA 22304-1813

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BANK ONE.

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Holdings summary

	Value on December 31, 2004	Value on December 31, 2003	Change in value
Cash equivalents	$8,379.05		
Equities	352,326.84		
Fixed income	144,793.35		
Other	0.00		
Total holdings	**$503,499.24**	**$477,890.04**	**$25,609.20**
Accruals (income earned but not yet received)	$1,511.35		
Total holdings with accruals	**$505,010.59**		

Income summary

Income	Statement period	January 1 to December 31
Dividends (domestic/foreign/mutual fund income)	$10,704.05	$10,704.05
Interest (taxable/non-taxable)	50.11	50.11
Other income	0.00	0.00
Total income	**$10,754.16**	$10,754.16
Realized gain/(loss)		
	$11,939.35	$11,939.35

The income summary includes taxable and tax-exempt income for both principal and income beneficiaries, please refer to the Transaction detail for an income breakdown. These amounts represent approximate income and gain/(loss) amounts and should not be used for final Internal Revenue Service reporting.

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Market reconciliation

	Statement period	January 1 to December 31
Beginning market value	$477,890.04	$477,890.04
Receipts	785.41	785.41
Disbursements	(14,217.04)	(14,217.04)
Income	10,754.16	10,754.16
Capital gains distributions	1,323.62	1,323.62
Change in asset market value	26,963.05	26,963.05
Ending market value	$503,499.24	$503,499.24

The Market reconciliation provides a summary of all activity in the account. The Receipts and Disbursements categories may include Non-Cash Transactions such as transfers within the account, name change transactions, asset receipts and distributions, and stock split transactions. The Transaction detail section provides an itemized list of all transactions. The Transaction summary provides a summary of cash receipt and disbursement transactions.

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Transaction summary

	Income	Principal
Beginning cash balance 1/1/04	$(185.41)	$185.41
Cash receipts		
Dividends (domestic/foreign/mutual fund income)	$10,104.05	$600.00
Interest (taxable/non-taxable)	50.11	0.00
Other cash receipts	785.41	1,323.62
Total cash receipts	$10,939.57	$1,923.62
Cash disbursements		
Cash disbursements	$(7,471.77)	$(785.41)
Administrative expenses	(3,282.39)	(2,677.47)
Total cash disbursements	$(10,754.16)	$(3,462.88)
Investment transactions		
Purchases	$0.00	$(66,540.53)
Sales and maturities	0.00	67,894.38
Total investment transactions	$0.00	$1,353.85
Ending cash balance 12/31/04	$0.00	$0.00

4811

4812

Only the Asset allocation analysis includes mutual fund holdings. The Bond quality and maturity analyses (if applicable) are displayed excluding mutual funds.

Investment objective: Tax-Free Growth and Income

This strategy seeks to provide long-term capital appreciation and tax-exempt current income by investing primarily in equity securities (60% - 80%) and secondarily in tax-exempt fixed income securities (20% - 40%). Principal volatility is expected to be moderate.

Asset allocation

1.3% - **Cash equivalents**

69.9% - **Equities**
- 30.2% - *Mutual funds*
- 6.4% - *Technology*
- 5.1% - *Finance*
- 4.7% - *Banks*
- 4.4% - *Retail*
- 19.1% - *Other equities*

28.8% - **Fixed income**
- 28.8% - *Mutual funds*

The Asset allocation may not be exactly as described in the Investment objective due to Other Asset holdings.

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4814

Holdings detail

Cash equivalents

Very liquid assets

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
ONE GROUP PRIME MONEY MARKET FUND	6,379.050	1.000	$6,379.05	$6,379.05	$0.00	1.73%	$110.36
Total cash equivalents			$6,379.05	$6,379.05	$0.00		$110.36

Equities

Banks

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
NORTH FORK BANCORPORATION INC N Y	300.000	28.850	$8,655.00	$6,447.98	$2,207.02	3.05%	$264.00
US BANCORP DEL NEW	275.000	31.320	8,613.00	7,075.75	1,537.25	3.83%	330.00
WELLS FARGO & CO NEW	100.000	62.150	6,215.00	4,765.90	1,449.10	3.09%	192.00
Total banks			$23,483.00	$18,289.63	$5,193.37		$786.00
Capital equipment							
GENERAL ELEC CO	300.000	36.500	10,950.00	4,975.42	5,974.58	2.41%	264.00
TYCO INTL LTD NEW	100.000	35.740	3,574.00	5,328.00	(1,754.00)	1.12%	40.00
Total capital equipment			$14,524.00	$10,303.42	$4,220.58		$304.00
Consumer capital spending							
LEAR CORP	100.000	61.010	6,101.00	5,876.00	225.00	1.31%	80.00
Consumer cyclical							
VIACOM INC CL B	100.000	36.390	3,639.00	5,023.00	(1,384.00)	0.77%	28.00

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Holdings detail continued

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
Consumer non-durable							
GENERAL MLS INC	100.000	49.710	$4,971.00	$4,547.00	$424.00	2.49%	$124.00
SYSCO CORP	100.000	38.170	3,817.00	2,992.00	825.00	1.57%	60.00
Total consumer non-durable			$8,788.00	$7,539.00	$1,249.00		$184.00
Energy							
EXXON MOBIL CORP	400.000	51.260	20,504.00	10,150.22	10,353.78	2.11%	432.00
Finance							
CITIGROUP INC	376.000	48.180	18,115.68	6,678.76	11,436.92	3.32%	601.60
FHLMC	100.000	73.700	7,370.00	6,085.00	1,285.00	1.63%	120.00
Total finance			$25,485.68	$12,763.76	$12,721.92		$721.60
Health care							
AMGEN INC	100.000	64.150	6,415.00	4,926.90	1,488.10	0.00%	0.00
CAREMARK RX INC	200.000	39.430	7,886.00	4,276.00	3,610.00	0.00%	0.00
PFIZER INC	300.000	26.890	8,067.00	7,880.17	186.83	2.83%	228.00
Total health care			$22,368.00	$17,083.07	$5,284.93		$228.00
Industrial commodities							
ALCOA INC	200.000	31.420	6,284.00	6,776.00	(492.00)	1.91%	120.00
Mutual funds							
ONE GROUP DIVERSIFIED EQUITY FUND	6,153.644	12.260	75,443.68	60,490.32	14,953.36	0.64%	479.98
ONE GROUP INTERNATIONAL EQTY INDX FD	884.956	20.030	17,725.67	15,000.00	2,725.67	0.93%	165.49
ONE GROUP MID CAP GROWTH FUND	936.308	24.050	22,518.16	15,280.52	7,237.64	0.00%	0.00

Holdings detail continued

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain/(loss)	Current yield	Estimated annual income
ONE GROUP MID CAP VALUE FUND	1,180.173	18.160	$21,431.94	$15,000.00	$6,431.94	0.61%	$129.82
ONE GROUP SMALL CAP GROWTH FUND	606.796	12.990	7,882.28	5,000.00	2,882.28	0.00%	0.00
ONE GROUP SMALL CAP VALUE FUND	292.912	25.240	7,393.10	5,000.00	2,393.10	0.28%	21.09
Total mutual funds			$152,394.83	$115,770.84	$36,623.99		$796.38
Other utilities							
DOMINION RES INC VA NEW	100.000	67.740	6,774.00	6,659.00	115.00	3.93%	266.00
Retail							
HOME DEPOT INC	100.000	42.740	4,274.00	4,846.00	(572.00)	0.80%	34.00
KOHLS CORP	100.000	49.170	4,917.00	5,182.83	(265.83)	0.00%	0.00
WAL MART STORES INC	250.000	52.820	13,205.00	3,516.67	9,688.33	0.98%	130.00
Total retail			$22,396.00	$13,545.50	$8,850.50		$164.00
Technology							
CISCO SYS INC	200.000	19.320	3,864.00	3,266.00	598.00	0.00%	0.00
DELL INC	200.000	42.140	8,428.00	7,030.00	1,398.00	0.00%	0.00
INTEL CORP	200.000	23.390	4,678.00	3,465.63	1,212.37	1.37%	64.00
INTERNATIONAL BUSINESS MACHS CORP	100.000	98.580	9,858.00	3,417.50	6,440.50	0.73%	72.00
MICROSOFT CORP	200.000	26.720	5,344.00	2,318.75	3,025.25	1.20%	64.00
Total technology			$32,172.00	$19,497.88	$12,674.12		$200.00

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Holdings detail continued

Telephone utilities

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield		Estimated annual income
VERIZON COMMUNICATIONS	183.000	40.510	$7,413.33	$6,840.00	$573.33	3.80%		$281.82
Total equities			$352,326.84	$256,117.32	$96,209.52			$4,591.80

Fixed income

Mutual funds

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Yield to maturity	Estimated annual income
ONE GROUP INTERMEDIATE TAX-FREE BOND FUND (HLTIX)	6,560.168	11.250	$73,801.89	$71,000.00	$2,801.89	3.91%		$2,886.47
ONE GROUP MUNICIPAL INCOME FUND (HLTAX)	7,178.105	9.890	70,991.46	70,000.00	991.46	4.25%		3,014.80
Total fixed income			$144,793.35	$141,000.00	$3,793.35			$5,901.27
Total holdings			$503,499.24	$403,495.37	$100,002.87			$10,603.43
Accruals (income earned but not yet received)			$1,511.35					
Total holdings with accruals			$505,010.59					

Assets identified with an asterisk (*) at the beginning of the asset name are held in the Invested Income Portfolio.

4818

Transaction detail

	Income	Principal
Beginning cash balance 1/1/04	$(185.41)	$185.41

Cash receipts

Foreign dividends

Date	Description	Realized gain/(loss)	Income	Principal
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON TYCO INTL LTD NEW $0.0125/SHARE ON 100 SHARES DUE 2/2/04 FOREIGN CASH DIVIDEND		$1.25	
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON TYCO INTL LTD NEW $0.0125/SHARE ON 100 SHARES DUE 5/3/04 FOREIGN CASH DIVIDEND		1.25	
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON TYCO INTL LTD NEW $0.0125/SHARE ON 100 SHARES DUE 8/2/04 FOREIGN CASH DIVIDEND		1.25	
11/1/04	CASH RECEIPT CASH DIVIDEND TYCO INTL LTD NEW FOREIGN CASH DIVIDEND		1.25	
Total foreign dividends			$5.00	$0.00

4819

Transaction detail continued

Domestic dividends

Date	Description	Realized gain/(loss)	Income	Principal
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON AUTOMATIC DATA PROCESSING INC $0.14/SHARE ON 100 SHARES DUE 1/1/04		$14.00	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON MBNA CORP $0.10/SHARE ON 200 SHARES DUE 1/1/04		20.00	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON VIACOM INC CL B $0.06/SHARE ON 100 SHARES DUE 1/1/04		6.00	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON SARA LEE CORP $0.1875/SHARE ON 300 SHARES DUE 1/2/04		56.25	
1/5/04	CASH RECEIPT OF DIVIDEND EARNED ON WAL MART STORES INC $0.09/SHARE ON 300 SHARES DUE 1/5/04		27.00	
1/23/04	CASH RECEIPT OF DIVIDEND EARNED ON SYSCO CORP $0.13/SHARE ON 100 SHARES DUE 1/23/04		13.00	
1/26/04	CASH RECEIPT OF DIVIDEND EARNED ON GENERAL ELEC CO $0.20/SHARE ON 300 SHARES DUE 1/26/04		60.00	

4820

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON J P MORGAN CHASE & CO $0.34/SHARE ON 185 SHARES DUE 1/31/04		$62.90	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON GENERAL MLS INC $0.275/SHARE ON 100 SHARES DUE 2/2/04		27.50	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON VERIZON COMMUNICATIONS $0.385/SHARE ON 183 SHARES DUE 2/2/04		70.46	
2/13/04	CASH RECEIPT OF DIVIDEND EARNED ON D R HORTON INC $0.08/SHARE ON 300 SHARES DUE 2/13/04		24.00	
2/13/04	CASH RECEIPT OF DIVIDEND EARNED ON MARSH & MCLENNAN COS INC $0.31/SHARE ON 100 SHARES DUE 2/13/04		31.00	
2/17/04	CASH RECEIPT OF DIVIDEND EARNED ON NORTH FORK BANCORPORATION INC N Y $0.30/SHARE ON 200 SHARES DUE 2/17/04		60.00	
2/27/04	CASH RECEIPT OF DIVIDEND EARNED ON CITIGROUP INC $0.40/SHARE ON 376 SHARES DUE 2/27/04		150.40	
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON AMERISOURCEBERGEN CORP $0.025/SHARE ON 100 SHARES DUE 3/1/04		2.50	

4821

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON INTEL CORP $0.04/SHARE ON 200 SHARES DUE 3/1/04		$8.00	
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON WELLS FARGO & CO NEW $0.45/SHARE ON 100 SHARES DUE 3/1/04		45.00	
3/5/04	CASH RECEIPT OF DIVIDEND EARNED ON PFIZER INC $0.17/SHARE ON 140 SHARES DUE 3/5/04		23.80	
3/10/04	CASH RECEIPT OF DIVIDEND EARNED ON EXXON MOBIL CORP $0.25/SHARE ON 464 SHARES DUE 3/10/04		116.00	
3/10/04	CASH RECEIPT OF DIVIDEND EARNED ON INTERNATIONAL BUSINESS MACHS CORP $0.16/SHARE ON 100 SHARES DUE 3/10/04		16.00	
3/22/04	CASH RECEIPT OF DIVIDEND EARNED ON HOME DEPOT INC $0.07/SHARE ON 100 SHARES DUE 3/22/04		7.00	
3/31/04	CASH RECEIPT OF DIVIDEND EARNED ON FHLMC $0.30/SHARE ON 100 SHARES DUE 3/31/04		30.00	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON AUTOMATIC DATA PROCESSING INC $0.14/SHARE ON 100 SHARES DUE 4/1/04		14.00	

4823

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON MBNA CORP $0.12/SHARE ON 200 SHARES DUE 4/1/04		$24.00	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON SARA LEE CORP $0.1875/SHARE ON 300 SHARES DUE 4/1/04		56.25	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON VIACOM INC CL B $0.06/SHARE ON 100 SHARES DUE 4/1/04		6.00	
4/5/04	CASH RECEIPT OF DIVIDEND EARNED ON WAL MART STORES INC $0.13/SHARE ON 300 SHARES DUE 4/5/04		39.00	
4/23/04	CASH RECEIPT OF DIVIDEND EARNED ON SYSCO CORP $0.13/SHARE ON 100 SHARES DUE 4/23/04		13.00	
4/26/04	CASH RECEIPT OF DIVIDEND EARNED ON GENERAL ELEC CO $0.20/SHARE ON 300 SHARES DUE 4/26/04		60.00	
4/30/04	CASH RECEIPT OF DIVIDEND EARNED ON J P MORGAN CHASE & CO $0.34/SHARE ON 185 SHARES DUE 4/30/04		62.90	
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON GENERAL MLS INC $0.275/SHARE ON 100 SHARES DUE 5/3/04		27.50	

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON VERIZON COMMUNICATIONS $0.385/SHARE ON 183 SHARES DUE 5/3/04		$70.46	
5/14/04	CASH RECEIPT OF DIVIDEND EARNED ON MARSH & MCLENNAN COS INC $0.31/SHARE ON 100 SHARES DUE 5/14/04		31.00	
5/17/04	CASH RECEIPT OF DIVIDEND EARNED ON NORTH FORK BANCORPORATION INC N Y $0.30/SHARE ON 200 SHARES DUE 5/17/04		60.00	
5/21/04	CASH RECEIPT OF DIVIDEND EARNED ON D R HORTON INC $0.08/SHARE ON 300 SHARES DUE 5/21/04		24.00	
5/28/04	CASH RECEIPT OF DIVIDEND EARNED ON CITIGROUP INC $0.40/SHARE ON 376 SHARES DUE 5/28/04		150.40	
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON INTEL CORP $0.04/SHARE ON 200 SHARES DUE 6/1/04		8.00	
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON WELLS FARGO & CO NEW $0.45/SHARE ON 100 SHARES DUE 6/1/04		45.00	
6/4/04	CASH RECEIPT OF DIVIDEND EARNED ON PFIZER INC $0.17/SHARE ON 140 SHARES DUE 6/4/04		23.80	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
6/7/04	CASH RECEIPT OF DIVIDEND EARNED ON AMERISOURCEBERGEN CORP $0.025/SHARE ON 100 SHARES DUE 6/7/04		$2.50	
6/7/04	CASH RECEIPT OF DIVIDEND EARNED ON WAL MART STORES INC $0.13/SHARE ON 300 SHARES DUE 6/7/04		39.00	
6/10/04	CASH RECEIPT OF DIVIDEND EARNED ON EXXON MOBIL CORP $0.27/SHARE ON 464 SHARES DUE 6/10/04		125.28	
6/10/04	CASH RECEIPT OF DIVIDEND EARNED ON INTERNATIONAL BUSINESS MACHS CORP $0.18/SHARE ON 100 SHARES DUE 6/10/04		18.00	
6/24/04	CASH RECEIPT OF DIVIDEND EARNED ON HOME DEPOT INC $0.085/SHARE ON 100 SHARES DUE 6/24/04		8.50	
6/30/04	CASH RECEIPT OF DIVIDEND EARNED ON FHLMC $0.30/SHARE ON 100 SHARES DUE 6/30/04		30.00	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON MBNA CORP $0.12/SHARE ON 200 SHARES DUE 7/1/04		24.00	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON SARA LEE CORP $0.1875/SHARE ON 300 SHARES DUE 7/1/04		56.25	

4825

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON VIACOM INC CL B $0.06/SHARE ON 100 SHARES DUE 7/1/04		$6.00	
7/15/04	CASH RECEIPT OF DIVIDEND EARNED ON US BANCORP DEL NEW $0.24/SHARE ON 275 SHARES DUE 7/15/04		66.00	
7/23/04	CASH RECEIPT OF DIVIDEND EARNED ON SYSCO CORP $0.13/SHARE ON 100 SHARES DUE 7/23/04		13.00	
7/26/04	CASH RECEIPT OF DIVIDEND EARNED ON GENERAL ELEC CO $0.20/SHARE ON 300 SHARES DUE 7/26/04		60.00	
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON GENERAL MLS INC $0.31/SHARE ON 100 SHARES DUE 8/2/04		31.00	
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON VERIZON COMMUNICATIONS $0.385/SHARE ON 183 SHARES DUE 8/2/04		70.46	
8/16/04	CASH RECEIPT OF DIVIDEND EARNED ON NORTH FORK BANCORPORATION INC N Y $0.30/SHARE ON 200 SHARES DUE 8/16/04		60.00	
8/27/04	CASH RECEIPT OF DIVIDEND EARNED ON CITIGROUP INC $0.40/SHARE ON 376 SHARES DUE 8/27/04		150.40	

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON INTEL CORP $0.04/SHARE ON 200 SHARES DUE 9/1/04		$8.00	
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON WELLS FARGO & CO NEW $0.48/SHARE ON 100 SHARES DUE 9/1/04		48.00	
9/3/04	CASH RECEIPT OF DIVIDEND EARNED ON PFIZER INC $0.17/SHARE ON 140 SHARES DUE 9/3/04		23.80	
9/7/04	CASH RECEIPT OF DIVIDEND EARNED ON WAL MART STORES INC $0.13/SHARE ON 300 SHARES DUE 9/7/04		39.00	
9/10/04	CASH RECEIPT OF DIVIDEND EARNED ON EXXON MOBIL CORP $0.27/SHARE ON 464 SHARES DUE 9/10/04		125.28	
9/10/04	CASH RECEIPT OF DIVIDEND EARNED ON INTERNATIONAL BUSINESS MACHS CORP $0.18/SHARE ON 100 SHARES DUE 9/10/04		18.00	
9/13/04	CASH RECEIPT OF DIVIDEND EARNED ON LEAR CORP $0.20/SHARE ON 100 SHARES DUE 9/13/04		20.00	
9/14/04	CASH RECEIPT OF DIVIDEND EARNED ON MICROSOFT CORP $0.08/SHARE ON 200 SHARES DUE 9/14/04		16.00	

4827

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
9/16/04	CASH RECEIPT OF DIVIDEND EARNED ON HOME DEPOT INC $0.085/SHARE ON 100 SHARES DUE 9/16/04		$8.50	
9/30/04	CASH RECEIPT OF DIVIDEND EARNED ON FHLMC $0.30/SHARE ON 100 SHARES DUE 9/30/04		30.00	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON MBNA CORP $0.12/SHARE ON 200 SHARES DUE 10/1/04		24.00	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON SARA LEE CORP $0.1875/SHARE ON 300 SHARES DUE 10/1/04		56.25	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON VIACOM INC CL B $0.06/SHARE ON 100 SHARES DUE 10/1/04		6.00	
10/15/04	CASH RECEIPT OF DIVIDEND EARNED ON US BANCORP DEL NEW $0.24/SHARE ON 275 SHARES DUE 10/15/04		66.00	
10/22/04	CASH RECEIPT OF DIVIDEND EARNED ON SYSCO CORP $0.13/SHARE ON 100 SHARES DUE 10/22/04		13.00	
10/25/04	CASH RECEIPT OF DIVIDEND EARNED ON GENERAL ELEC CO $0.20/SHARE ON 300 SHARES DUE 10/25/04		60.00	

4828

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON GENERAL MLS INC $0.31/SHARE ON 100 SHARES DUE 11/1/04		$31.00	
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON VERIZON COMMUNICATIONS $0.385/SHARE ON 183 SHARES DUE 11/1/04		70.45	
11/15/04	CASH RECEIPT OF DIVIDEND EARNED ON NORTH FORK BANCORPORATION INC N Y $0.33/SHARE ON 200 SHARES DUE 11/15/04		66.00	
11/24/04	CASH RECEIPT OF DIVIDEND EARNED ON CITIGROUP INC $0.40/SHARE ON 376 SHARES DUE 11/24/04		150.40	
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON INTEL CORP $0.04/SHARE ON 200 SHARES DUE 12/1/04		8.00	
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON WELLS FARGO & CO NEW $0.48/SHARE ON 100 SHARES DUE 12/1/04		48.00	
12/2/04	SPECIAL CASH DIVIDEND 200 SHARES/PAR VALUE OF MICROSOFT CORP PAYABLE AT $3.00 DUE 12/02/04 TOTAL INCOME $600.00			$600.00

4829

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
12/2/04	CASH RECEIPT OF DIVIDEND EARNED ON MICROSOFT CORP $0.08/SHARE ON 200 SHARES DUE 12/2/04		$16.00	
12/3/04	CASH RECEIPT OF DIVIDEND EARNED ON PFIZER INC $0.17/SHARE ON 140 SHARES DUE 12/3/04		23.80	
12/10/04	CASH RECEIPT OF DIVIDEND EARNED ON EXXON MOBIL CORP $0.27/SHARE ON 464 SHARES DUE 12/10/04		125.28	
12/10/04	CASH RECEIPT OF DIVIDEND EARNED ON INTERNATIONAL BUSINESS MACHS CORP $0.18/SHARE ON 100 SHARES DUE 12/10/04		18.00	
12/13/04	CASH RECEIPT OF DIVIDEND EARNED ON LEAR CORP $0.20/SHARE ON 100 SHARES DUE 12/13/04		20.00	
12/16/04	CASH RECEIPT OF DIVIDEND EARNED ON HOME DEPOT INC $0.085/SHARE ON 100 SHARES DUE 12/16/04		8.50	
12/20/04	CASH RECEIPT OF DIVIDEND EARNED ON DOMINION RES INC VA NEW $0.665/SHARE ON 100 SHARES DUE 12/20/04		66.50	

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
12/31/04	CASH RECEIPT OF DIVIDEND EARNED ON FHLMC $0.30/SHARE ON 100 SHARES DUE 12/31/04		$30.00	
Total domestic dividends			$3,590.28	$600.00
Mutual fund income				
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.023697/SHARE ON 6,153.644 SHARES DUE 1/2/04		145.82	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 12/1/03 TO 12/31/03		249.29	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.025871/SHARE ON 1,180.173 SHARES DUE 1/2/04		30.53	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 12/1/03 TO 12/31/03		251.23	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.020931/SHARE ON 292.912 SHARES DUE 1/2/04		6.13	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 1/1/04 TO 1/31/04		242.73	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 1/1/04 TO 1/31/04		$251.23	
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 2/1/04 TO 2/29/04		236.17	
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 2/1/04 TO 2/29/04		236.88	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.015892/SHARE ON 6,153.644 SHARES DUE 4/1/04		97.79	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 3/1/04 TO 3/31/04		236.17	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.015312/SHARE ON 1,180.173 SHARES DUE 4/1/04		18.07	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 3/1/04 TO 3/31/04		229.70	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.021058/SHARE ON 292.912 SHARES DUE 4/1/04		6.17	

4832

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 4/1/04 TO 4/30/04		$242.73	
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 4/1/04 TO 4/30/04		215.34	
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 5/1/04 TO 5/31/04		242.73	
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 5/1/04 TO 5/31/04		229.70	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.019805/SHARE ON 6,153.644 SHARES DUE 7/1/04		120.64	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 6/1/04 TO 6/30/04		242.73	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.040723/SHARE ON 1,180.173 SHARES DUE 7/1/04		48.06	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 6/1/04 TO 6/30/04		244.06	

4833

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.003055/SHARE ON 292.912 SHARES DUE 7/1/04		$0.89	
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 7/1/04 TO 7/31/04		242.73	
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 7/1/04 TO 7/31/04		236.88	
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 8/1/04 TO 8/31/04		236.17	
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 8/1/04 TO 8/31/04		265.59	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.018352/SHARE ON 6,153.644 SHARES DUE 10/1/04		112.93	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 9/1/04 TO 9/30/04		236.17	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.02841/SHARE ON 1,180.173 SHARES DUE 10/1/04		33.53	

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 9/1/04 TO 9/30/04		$279.95	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.026621/SHARE ON 292.912 SHARES DUE 10/1/04		7.80	
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 10/1/04 TO 10/31/04		236.17	
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 10/1/04 TO 10/31/04		287.12	
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 11/1/04 TO 11/30/04		236.17	
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 11/1/04 TO 11/30/04		272.77	
Total mutual fund income			$6,508.77	$0.00
Taxable Interest				
1/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 12/1/03 TO 12/31/03		3.48	

4835

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
2/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 1/1/04 TO 1/31/04		$3.36	
3/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 2/1/04 TO 2/29/04		3.27	
4/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 3/1/04 TO 3/31/04		2.91	
5/3/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 4/1/04 TO 4/30/04		2.75	
6/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 5/1/04 TO 5/31/04		3.01	
7/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 6/1/04 TO 6/30/04		3.52	
8/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 7/1/04 TO 7/31/04		4.39	
9/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 8/1/04 TO 8/31/04		5.43	

4836

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
10/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 9/1/04 TO 9/30/04		$5.18	
11/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 10/1/04 TO 10/31/04		5.76	
12/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 11/1/04 TO 11/30/04		7.05	
Total taxable interest			$50.11	$0.00
Other cash receipts				
1/14/04	CASH RECEIPT TRANSFER FROM PRINCIPAL		185.41	
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP SMALL CAP GROWTH FUND $0.058/SHARE ON 606.796 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $35.20 ON FEDERAL COST LT CAPITAL GAIN OF $35.20 ON STATE COST	$35.20		$35.20

4837

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP MID CAP VALUE FUND $0.5507/SHARE ON 1,180.173 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $649.94 ON FEDERAL COST LT CAPITAL GAIN OF $649.94 ON STATE COST	$649.94		$649.94
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP SMALL CAP VALUE FUND $2.1798/SHARE ON 292.912 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $638.48 ON FEDERAL COST LT CAPITAL GAIN OF $638.48 ON STATE COST	638.48		638.48
12/21/04	CASH RECEIPT TRANSFER FROM PRINCIPAL MICROSOFT CORP PRINCIPAL TO INCOME TRANSFER - MICROSOFT DIVIDEND		$600.00	
Total other cash receipts			$785.41	$1,323.62
Total cash receipts			**$10,939.57**	**$1,923.62**

Cash disbursements

Other cash disbursements

Date	Description	Income	Principal
1/14/04	CASH DISBURSEMENT TRANSFER TO INCOME		$(185.41)

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Transaction detail continued

Date	Description	Income	Principal
3/10/04	CASH DISBURSEMENT PAID TO BANK ONE MILWAUKEE DDA#550462366 ACH TRANSFER TO CHECKING ACCT PAID FOR F JAMES SENSENBRENNER JR 075000019-550462366	$(2,046.04)	
6/10/04	CASH DISBURSEMENT PAID TO BANK ONE MILWAUKEE DDA#550462366 ACH TRANSFER TO CHECKING ACCT PAID FOR F JAMES SENSENBRENNER JR 075000019-550462366	(1,181.96)	
9/10/04	CASH DISBURSEMENT PAID TO BANK ONE MILWAUKEE DDA#550462366 ACH TRANSFER TO CHECKING ACCT PAID FOR F JAMES SENSENBRENNER JR 075000019-550462366	(1,829.48)	
12/10/04	CASH DISBURSEMENT PAID TO BANK ONE MILWAUKEE DDA#550462366 ACH TRANSFER TO CHECKING ACCT PAID FOR F JAMES SENSENBRENNER JR 075000019-550462366	(1,916.74)	
12/21/04	CASH DISBURSEMENT TRANSFER TO INCOME MICROSOFT CORP PRINCIPAL TO INCOME TRANSFER - MICROSOFT DIVIDEND		$(600.00)

4839

Transaction detail continued

Date	Description	Income	Principal
12/31/04	CASH DISBURSEMENT PAID TO BANK ONE MILWAUKEE DDA#550462366 ACH TRANSFER TO CHECKING ACCT PAID FOR F JAMES SENSENBRENNER JR 075000019-550462366	$(497.55)	
Total other cash disbursements		$(7,471.77)	$(785.41)
Administrative expenses			
1/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH DECEMBER MONTH END	(222.85)	$(222.86)
2/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JANUARY MONTH END	(226.29)	(226.29)
3/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH FEBRUARY MONTH END	(230.30)	(230.31)
4/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH MARCH MONTH END	(227.28)	(227.29)
5/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH APRIL MONTH END	(220.87)	(220.87)
5/18/04	MISCELLANEOUS TAX SERVICE FEES COLLECTED 2003 GENERATION SKIPPING REVIEW	(115.00)	
6/10/04	FIDUCIARY TAX RETURN PREP COLLECTED 2003 FORMS 1041/2	(490.00)	
6/14/04	ADMINISTRATIVE FEES COLLECTED THROUGH MAY MONTH END	(222.09)	(222.10)

Transaction detail continued

Date	Description	Income	Principal
7/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JUNE MONTH END	$(220.60)	$(220.60)
8/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JULY MONTH END	(217.86)	(217.86)
9/13/04	ADMINISTRATIVE FEES COLLECTED THROUGH AUGUST MONTH END	(219.24)	(219.25)
10/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH SEPTEMBER MONTH END	(220.03)	(220.04)
11/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH OCTOBER MONTH END	(222.53)	(222.54)
12/13/04	ADMINISTRATIVE FEES COLLECTED THROUGH NOVEMBER MONTH END	(227.45)	(227.46)
Total administrative expenses		$(3,282.39)	$(2,677.47)
Total cash disbursements		$(10,754.16)	$(3,462.88)

Investment transactions

Purchases

Date	Description	Realized gain/(loss)	Income	Principal
	COMBINED PURCHASES FOR THE PERIOD 1/ 1/04 - 12/31/04 OF ONE GROUP PRIME MONEY MARKET FUND INVESTMENTS AT TAX COST: $13,674.18			$(13,674.18)

4841

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
5/6/04	PURCHASED 275 SHARES OF US BANCORP DEL NEW TRADE DATE 5/3/04 PURCHASED THROUGH SPEAR, LEEDS & KELLOGG PAID $8.25 BROKERAGE 275 SHARES AT $25.70 INVESTMENTS AT TAX COST: $7,075.75			$(7,075.75)
6/3/04	PURCHASED 200 SHARES OF DELL INC TRADE DATE 5/28/04 PURCHASED THROUGH SPEAR, LEEDS & KELLOGG PAID $6.00 BROKERAGE 200 SHARES AT $35.12 INVESTMENTS AT TAX COST: $7,030.00			(7,030.00)
6/3/04	PURCHASED 884.956 SHARES OF ONE GROUP INTERNATIONAL EQTY INDX FD TRADE DATE 6/2/04 884.956 SHARES AT $16.95 INVESTMENTS AT TAX COST: $15,000.00			(15,000.00)
6/3/04	PURCHASED 100 SHARES OF LEAR CORP TRADE DATE 5/28/04 PURCHASED THROUGH SPEAR, LEEDS & KELLOGG PAID $3.00 BROKERAGE 100 SHARES AT $58.73 INVESTMENTS AT TAX COST: $5,876.00			(5,876.00)

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
11/22/04	PURCHASED 160 SHARES OF PFIZER INC TRADE DATE 11/17/04 PURCHASED THROUGH SPEAR, LEEDS & KELLOGG PAID $4.80 BROKERAGE 160 SHARES AT $27.78 INVESTMENTS AT TAX COST: $4,449.60			$(4,449.60)
11/22/04	PURCHASED 200 SHARES OF ALCOA INC TRADE DATE 11/17/04 PURCHASED THROUGH SPEAR, LEEDS & KELLOGG PAID $6.00 BROKERAGE 200 SHARES AT $33.85 INVESTMENTS AT TAX COST: $6,776.00			(6,776.00)
11/22/04	PURCHASED 100 SHARES OF DOMINION RES INC VA NEW TRADE DATE 11/17/04 PURCHASED THROUGH SPEAR, LEEDS & KELLOGG PAID $3.00 BROKERAGE 100 SHARES AT $66.56 INVESTMENTS AT TAX COST: $6,659.00			(6,659.00)
Total purchases			$0.00	$(66,540.53)
Sales and maturities				
	COMBINED SALES FOR THE PERIOD 1/ 1/04 - 12/31/04 OF ONE GROUP PRIME MONEY MARKET FUND INVESTMENTS AT TAX COST: $-12,899.35			12,899.35

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
5/6/04	SOLD 185 SHARES OF J P MORGAN CHASE & CO TRADE DATE 5/3/04 SOLD THROUGH SPEAR, LEEDS & KELLOGG PAID $5.55 BROKERAGE PAID $0.16 SEC FEE 185 SHARES AT $37.74 INVESTMENTS AT TAX COST: $-4,994.17	$1,982.02		$6,976.19
6/3/04	SOLD 200 SHARES OF COMCAST CORP NEW CL A TRADE DATE 5/28/04 SOLD THROUGH SPEAR, LEEDS & KELLOGG PAID $6.00 BROKERAGE PAID $0.14 SEC FEE 200 SHARES AT $29.08 INVESTMENTS AT TAX COST: $-6,070.00	(260.14)		5,809.86
6/3/04	SOLD 100 SHARES OF MARSH & MCLENNAN COS INC TRADE DATE 5/28/04 SOLD THROUGH SPEAR, LEEDS & KELLOGG PAID $3.00 BROKERAGE PAID $0.11 SEC FEE 100 SHARES AT $44.03 INVESTMENTS AT TAX COST: $-4,873.55	(473.66)		4,399.89

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
6/3/04	SOLD 300 SHARES OF D R HORTON INC TRADE DATE 5/28/04 SOLD THROUGH SPEAR, LEEDS & KELLOGG PAID $9.00 BROKERAGE PAID $0.21 SEC FEE 300 SHARES AT $29.20167 INVESTMENTS AT TAX COST: $-4,856.67	$3,894.62		$8,751.29
6/3/04	SOLD 100 SHARES OF AMERISOURCEBERGEN CORP TRADE DATE 5/28/04 SOLD THROUGH SPEAR, LEEDS & KELLOGG PAID $3.00 BROKERAGE PAID $0.15 SEC FEE 100 SHARES AT $59.91 INVESTMENTS AT TAX COST: $-5,819.00	168.85		5,987.85
6/3/04	SOLD 100 SHARES OF AUTOMATIC DATA PROCESSING INC TRADE DATE 5/28/04 SOLD THROUGH SPEAR, LEEDS & KELLOGG PAID $3.00 BROKERAGE PAID $0.11 SEC FEE 100 SHARES AT $44.68 INVESTMENTS AT TAX COST: $-5,430.00	(965.11)		4,464.89

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
11/22/04	SOLD 300 SHARES OF SARA LEE CORP TRADE DATE 11/17/04 SOLD THROUGH SPEAR, LEEDS & KELLOGG PAID $9.00 BROKERAGE PAID $0.18 SEC FEE 300 SHARES AT $24.26 INVESTMENTS AT TAX COST: $-6,108.75	$1,160.07		$7,268.82
11/22/04	SOLD 200 SHARES OF MBNA CORP TRADE DATE 11/17/04 SOLD THROUGH SPEAR, LEEDS & KELLOGG PAID $8.00 BROKERAGE PAID $0.13 SEC FEE 200 SHARES AT $26.67 INVESTMENTS AT TAX COST: $-3,808.18	1,519.69		5,327.87
11/22/04	SOLD 50 SHARES OF WAL MART STORES INC TRADE DATE 11/17/04 SOLD THROUGH SPEAR, LEEDS & KELLOGG PAID $1.50 BROKERAGE PAID $0.07 SEC FEE 50 SHARES AT $56.29 INVESTMENTS AT TAX COST: $-703.33	2,109.60		2,812.93

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
11/22/04	SOLD 64 SHARES OF EXXON MOBIL CORP TRADE DATE 11/17/04 SOLD THROUGH SPEAR, LEEDS & KELLOGG PAID $1.92 BROKERAGE PAID $0.08 SEC FEE 64 SHARES AT $49.96 INVESTMENTS AT TAX COST: $-1,715.65	$1,479.79		$3,195.44
Total sales and maturities			$0.00	$67,894.38
Total investment transactions			$0.00	$1,353.85

Other investment transactions (non-cash)

Date	Description	Income	Principal
1/13/04	STOCK SPLIT 3 FOR 2 STOCK SPLIT ON D R HORTON INC DUE 1/12/04 100 ADDITIONAL SHARES RECEIVED		

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Transaction detail continued

Date	Description	Income	Principal
11/16/04	STOCK SPLIT 3 FOR 2 STOCK SPLIT ON NORTH FORK BANCORPORATION INC N Y DUE 11/15/04 100 ADDITIONAL SHARES RECEIVED		
Total other investment transactions (non-cash)		$0.00	$0.00

	Income	Principal
Ending cash balance 12/31/04	$0.00	$0.00

No pending trades.

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Although market values and prices for publicly-traded securities have been obtained from sources or third parties Bank One believes to be reliable, Bank One does not guarantee their accuracy. Certain assets may not be held by Bank One,and their reporting is at the request and for the convenience of the account owner. Certain assets, including, but not limited to, closely held, non-publicly-traded and infrequently traded securities, derivatives, partnership interests, tangible assets, and life insurance policy cash values cannot be readily priced. The valuation, pricing and/or transaction information is not independently verified by Bank One, is reflected as of the last date provided to Bank One and may not be current. Such information may not be determined by Bank One and may not have been provided to us by third parties who are not independent of the issuer or manager. Certain assets may be carried at cost.

This statement is not an official document for income tax reporting purposes.

When reviewing your Bond quality table, the percentages are rounded to zero when the percentage for a rating category is less than one percent.

When reviewing your Holdings detail, the market value listed for each asset may not equal quantity multiplied by share price due to rounding. The Market value column will always provide the most accurate figure.

Market values noted in the Market reconciliation and Transaction detail are as of the end of the statement period. The market value on the date of the transaction may be different.

Please be aware that the information shown in the Realized gain/(loss) column (found in the Transaction detail section of your statement) is based on TAX COST, even though the assets on your statement may be carried at Book value. Please contact your Advisor if you have questions regarding this information or any part of your statement.

Bank One or its affiliates may receive and accept from time to time 12B-1 fees, shareholder servicing fees, sub-transfer agency fees, network reimbursement fees, or other fees from unaffiliated mutual funds as described in the prospectus for the fund with respect to eligible accounts. Bank One has taken steps to avoid receiving fees with respect to ineligible accounts. If Bank One inadvertently receives any such fees for ineligible accounts, such fees will be returned to the fund's distributors or other payor.

Life insurance values are shown at cash surrender value most recently reported by you or the Insurance Company, except where the value shown is $1.00. If the value is $1.00, we have not received a cash surrender value.

FLORIDA CLIENTS, please note that an action for breach of trust based on matters disclosed in a trust accounting or other written report of the Trustee may be subject to a 6-month statute of limitations from the receipt of the trust accounting or other written report. Questions, please consult your attorney. (FL ST sec. 737.307)

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Annual Account Statement

F JAMES SENSENBRENNER JR CUSTODY
Account number 9500094700
January 1, 2004 - December 31, 2004

BANK ONE TRUST COMPANY, N.A.
111 E WISCONSIN AVE,12TH FLOOR
MILWAUKEE, WI 53202

www.bankone.com

Your Advisor is:
LYNN E PAULL
(414) 977-2027 or (800) 926-4556

Thank you for the opportunity to serve your financial needs. We appreciate your confidence in us.

Please remember to check the Bulletin board (located at the back of your statement) for important messages from Bank One.

Don't hesitate to contact your advisor if you have any questions, comments or concerns.

05030 00357
F JAMES SENSENBRENNER JR
609 FORT WILLIAMS PKWY
ALEXANDRIA VA 22304-1813

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Holdings summary

	Value on December 31, 2004	Value on December 31, 2003	Change in value
Cash equivalents	$7,123.72		
Equities	984,968.98		
Fixed income	0.00		
Other	0.00		
Total holdings	$992,092.70	$1,095,046.65	$(102,953.95)
Accruals (income earned but not yet received)	$6,117.16		
Total holdings with accruals	$998,209.86		

Income summary

Income	Statement period	January 1 to December 31
Dividends (domestic/foreign/mutual fund income)	$26,188.12	$26,188.12
Interest (taxable/non-taxable)	231.03	231.03
Other income	0.00	0.00
Total income	$26,419.15	$26,419.15
Realized gain/(loss)		
	$117,422.47	$117,422.47

The income summary includes taxable and tax-exempt income for both principal and income beneficiaries, please refer to the Transaction detail for an income breakdown. These amounts represent approximate income and gain/(loss) amounts and should not be used for final Internal Revenue Service reporting.

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Market reconciliation

	Statement period	January 1 to December 31
Beginning market value	$1,095,046.65	$1,095,046.65
Receipts	1,974.64	1,974.64
Disbursements	(254,894.64)	(254,894.64)
Income	26,419.15	26,419.15
Capital gains distributions	0.00	0.00
Change in asset market value	123,546.90	123,546.90
Ending market value	$992,092.70	$992,092.70

The Market reconciliation provides a summary of all activity in the account. The Receipts and Disbursements categories may include Non-Cash Transactions such as transfers within the account, name change transactions, asset receipts and distributions, and stock split transactions. The Transaction detail section provides an itemized list of all transactions. The Transaction summary provides a summary of cash receipt and disbursement transactions.

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Transaction summary

	Income	Principal
Beginning cash balance 1/1/04	$1,974.64	$(1,974.64)
Cash receipts		
Dividends (domestic/foreign/mutual fund income)	$26,188.12	$0.00
Interest (taxable/non-taxable)	231.03	0.00
Other cash receipts	0.00	1,974.64
Total cash receipts	$26,419.15	$1,974.64
Cash disbursements		
Cash disbursements	$(1,974.64)	$(219,000.00)
Administrative expenses	0.00	0.00
Total cash disbursements	$(1,974.64)	$(219,000.00)
Investment transactions		
Purchases	$0.00	$(27,453.48)
Sales and maturities	0.00	220,034.33
Total investment transactions	$0.00	$192,580.85
Ending cash balance 12/31/04	$26,419.15	$(26,419.15)

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Only the Asset allocation analysis includes mutual fund holdings. The Bond quality and maturity analyses (if applicable) are displayed excluding mutual funds.

Investment objective: Limited to Cash Management Only

This strategy seeks to provide a high level of current income, liquidity and principal stability by investing in high-quality money market securities. Principal volatility is not expected to be an issue.

Asset allocation

- 0.7% - **Cash equivalents**
- 99.3% - **Equities**
  - 97.8% - *Consumer non-durable*
  - 1.5% - *Industrial commodities*

The Asset allocation may not be exactly as described in the Investment objective due to Other Asset holdings.

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Holdings detail

Cash equivalents

Very liquid assets Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
ONE GROUP PRIME MONEY MARKET FUND	7,123.720	1.000	$7,123.72	$7,123.72	$0.00	1.73%	$123.24
INCOME CASH	26,419.150	1.000	26,419.15	26,419.15	0.00	0.00%	0.00
PRINCIPAL CASH	(26,419.150)	1.000	(26,419.15)	(26,419.15)	0.00	0.00%	0.00
Total cash equivalents			**$7,123.72**	**$7,123.72**	**$0.00**		**$123.24**

Equities

Consumer non-durable Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
KIMBERLY CLARK CORP	14,738.000	65.810	$969,907.78	$56,339.58	$913,568.20	2.43%	$23,580.80
Industrial commodities							
NEENAH PAPER INC	462.000	32.600	15,061.20	949.17	14,112.03	0.00%	0.00
Total equities			**$984,968.98**	**$57,288.75**	**$927,680.23**		**$23,580.80**
Total holdings			**$992,092.70**	**$64,412.47**	**$927,680.23**		**$23,704.04**
Accruals (income earned but not yet received)			$6,117.16				
Total holdings with accruals			**$998,209.86**				

Assets identified with an asterisk (*) at the beginning of the asset name are held in the Invested Income Portfolio.

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Transaction detail

		Income	Principal
Beginning cash balance 1/1/04		$1,974.64	$(1,974.64)
Cash receipts			
Domestic dividends			
Date	*Description*	*Income*	*Principal*
1/5/04	CASH RECEIPT OF DIVIDEND EARNED ON KIMBERLY CLARK CORP $0.34/SHARE ON 17,678 SHARES DUE 1/5/04	$6,010.52	
4/2/04	CASH RECEIPT OF DIVIDEND EARNED ON KIMBERLY CLARK CORP $0.40/SHARE ON 17,238 SHARES DUE 4/2/04	6,895.20	
7/2/04	CASH RECEIPT OF DIVIDEND EARNED ON KIMBERLY CLARK CORP $0.40/SHARE ON 17,238 SHARES DUE 7/2/04	6,895.20	
10/4/04	CASH RECEIPT OF DIVIDEND EARNED ON KIMBERLY CLARK CORP $0.40/SHARE ON 15,968 SHARES DUE 10/4/04	6,387.20	
Total domestic dividends		$26,188.12	$0.00
Taxable Interest			
1/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 12/1/03 TO 12/31/03	58.42	
2/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 1/1/04 TO 1/31/04	45.42	

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Transaction detail continued

Date	Description	Income	Principal
3/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 2/1/04 TO 2/29/04	$41.83	
4/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 3/1/04 TO 3/31/04	18.62	
5/3/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 4/1/04 TO 4/30/04	10.26	
6/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 5/1/04 TO 5/31/04	11.07	
7/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 6/1/04 TO 6/30/04	1.64	
8/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 7/1/04 TO 7/31/04	5.77	
9/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 8/1/04 TO 8/31/04	7.25	
10/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 9/1/04 TO 9/30/04	8.05	

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Transaction detail continued

Date	Description	Income	Principal
11/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 10/1/04 TO 10/31/04	$14.29	
12/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 11/1/04 TO 11/30/04	8.41	
Total taxable interest		$231.03	$0.00
Other cash receipts			
1/14/04	CASH RECEIPT TRANSFER FROM INCOME		$1,974.64
Total other cash receipts		$0.00	$1,974.64
Total cash receipts		**$26,419.15**	**$1,974.64**

Cash disbursements

Other cash disbursements

Date	Description	Income	Principal
1/14/04	CASH DISBURSEMENT TRANSFER TO PRINCIPAL	$(1,974.64)	
3/3/04	CASH DISBURSEMENT PAID TO BANK ONE MILWAUKEE DDA#550462366 ACH TRANSFER TO CHECKING ACCT PAID FOR F JAMES SENSENBRENNER JR 075000019-550462366		$(50,000.00)

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Transaction detail continued

Date	Description	Income	Principal
3/30/04	CASH DISBURSEMENT PAID TO BANK ONE MILWAUKEE DDA#550462366 ACH TRANSFER TO CHECKING ACCT PAID FOR F JAMES SENSENBRENNER JR 075000019-550462366		$(20,000.00)
6/4/04	CASH DISBURSEMENT PAID TO BANK ONE MILWAUKEE DDA#550462366 ACH TRANSFER TO CHECKING ACCT PAID FOR F JAMES SENSENBRENNER JR 075000019-550462366		(19,000.00)
6/10/04	CASH DISBURSEMENT PAID TO BANK ONE MILWAUKEE DDA#550462366 ACH TRANSFER TO CHECKING ACCT PAID FOR F JAMES SENSENBRENNER JR 075000019-550462366		(30,000.00)
8/11/04	CASH DISBURSEMENT PAID TO BANK ONE SVG4941588070 ACH TRANSFER TO SAVINGS ACCT PAID FOR F JAMES SENSENBRENNER JR 075000019-4941588070		(50,000.00)
10/28/04	CASH DISBURSEMENT PAID TO BANK ONE SVG4941588070 ACH TRANSFER TO SAVINGS ACCT PAID FOR F JAMES SENSENBRENNER JR 075000019-4941588070		(50,000.00)
Total other cash disbursements		$(1,974.64)	$(219,000.00)
Total cash disbursements		**$(1,974.64)**	**$(219,000.00)**

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Transaction detail continued

Investment transactions

Purchases

Date	Description	Realized gain/(loss)	Income	Principal
	COMBINED PURCHASES FOR THE PERIOD 1/ 1/04 - 12/31/04 OF ONE GROUP PRIME MONEY MARKET FUND INVESTMENTS AT TAX COST: $27,453.48			$(27,453.48)
Total purchases			$0.00	$(27,453.48)

Sales and maturities

	COMBINED SALES FOR THE PERIOD 1/ 1/04 - 12/31/04 OF ONE GROUP PRIME MONEY MARKET FUND INVESTMENTS AT TAX COST: $-96,782.99			96,782.99
6/10/04	SOLD 470 SHARES OF KIMBERLY CLARK CORP TRADE DATE 6/7/04 SOLD THROUGH SPEAR, LEEDS & KELLOGG PAID $14.10 BROKERAGE PAID $0.72 SEC FEE 470 SHARES AT $65.17	$30,615.08		30,615.08
8/11/04	SOLD 800 SHARES OF KIMBERLY CLARK CORP TRADE DATE 8/6/04 SOLD THROUGH SPEAR, LEEDS & KELLOGG PAID $24.00 BROKERAGE PAID $1.18 SEC FEE 800 SHARES AT $63.03 INVESTMENTS AT TAX COST: $-3,108.00	47,290.82		50,398.82

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
10/28/04	SOLD 700 SHARES OF KIMBERLY CLARK CORP TRADE DATE 10/25/04 SOLD THROUGH SPEAR, LEEDS & KELLOGG PAID $21.00 BROKERAGE PAID $0.99 SEC FEE 700 SHARES AT $60.34143 INVESTMENTS AT TAX COST: $-2,719.50	$39,497.51		$42,217.01
12/17/04	SOLD 0.6667 SHARES OF NEENAH PAPER INC TRADE DATE 12/17/04 SOLD THROUGH CASH IN LIEU OF FRACTIONAL SH CASH IN LIEU OF FRACTIONAL SHARE INVESTMENTS AT TAX COST: $-1.37	19.06		20.43
Total sales and maturities			$0.00	$220,034.33
Total investment transactions			**$0.00**	**$192,580.85**

Other investment transactions (non-cash)

Date	Description	Income	Principal
8/6/04	FED BASIS OF KIMBERLY CLARK CORP ADJUSTED BY $65,143.68 OLD: $0.00 /NEW: $65,143.68 INVESTMENTS AT TAX COST: $65,143.68		
8/6/04	STATE COST OF KIMBERLY CLARK CORP ADJUSTED BY $65,143.68 OLD: $0.00 /NEW: $65,143.68		

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Transaction detail continued

Date	Description	Income	Principal
12/2/04	SPIN OFF RECEIVED 462.6667 SHARES DISTRIBUTION AT 0.03030303 SHARES OF NEENAH PAPER INC FOR EACH SHARE OF KIMBERLY CLARK CORP DUE 11/30/04 MARKET VALUE OF $0.00 SPIN-OFF FROM KIMBERLY CLARK CORP CUSIP: 494368103		
12/6/04	SPIN OFF FEDERAL COST BASIS OF NEENAH PAPER INC ADJUSTED BY $950.54 OLD: $0.00 /NEW $950.54 SPIN-OFF TO NEENAH PAPER INC/ CUSIP: 640079109 INVESTMENTS AT TAX COST: $950.54		
12/6/04	SPIN OFF STATE COST BASIS OF NEENAH PAPER INC ADJUSTED BY $950.54 OLD: $0.00 /NEW $950.54 SPIN-OFF TO NEENAH PAPER INC/ CUSIP: 640079109		

Transaction detail continued

Date	Description	Income	Principal
12/6/04	SPIN OFF FEDERAL COST BASIS OF KIMBERLY CLARK CORP ADJUSTED BY $-950.54 OLD: $59,316.18 /NEW $58,365.64 SPIN-OFF TO NEENAH PAPER INC/ CUSIP: 640079109 INVESTMENTS AT TAX COST: $-950.54		
12/6/04	SPIN OFF STATE COST BASIS OF KIMBERLY CLARK CORP ADJUSTED BY $-950.54 OLD: $59,316.18 /NEW $58,365.64 SPIN-OFF TO NEENAH PAPER INC/ CUSIP: 640079109		
12/13/04	DISTRIBUTED 265 SHARES OF KIMBERLY CLARK CORP GIFT TO ROBERT ALAN SENSENBRENNER MARKET VALUE OF $16,960.00 INVESTMENTS AT TAX COST: $-1,013.03		

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BANK ONE.

Transaction detail continued

Date	Description	Income	Principal
12/13/04	DISTRIBUTED 265 SHARES OF KIMBERLY CLARK CORP GIFT TO FRANK JAMES SENSENBRENNER III MARKET VALUE OF $16,960.00 INVESTMENTS AT TAX COST: $-1,013.03		
Total other investment transactions (non-cash)		**$0.00**	**$0.00**

	Income	Principal
Ending cash balance 12/31/04	$26,419.15	$(26,419.15)

Pending trades

Pending sales

Trade date	Description	Amount
12/30/04	KIMBERLY CLARK CORP 185 SHARES AT $65.78/SHARE, ANTICIPATED SETTLEMENT DATE 01/04/2005.	$12,163.46

The settlement amount(s) appearing in the Pending trades section is net of commissions, therefore shares multiplied by price may not equal the settlement amount.

Although market values and prices for publicly-traded securities have been obtained from sources or third parties Bank One believes to be reliable, Bank One does not guarantee their accuracy. Certain assets may not be held by Bank One,and their reporting is at the request and for the convenience of the account owner. Certain assets, including, but not limited to, closely held, non-publicly-traded and infrequently traded securities, derivatives, partnership interests, tangible assets, and life insurance policy cash values cannot be readily priced. The valuation, pricing and/or transaction information is not independently verified by Bank One, is reflected as of the last date provided to Bank One and may not be current. Such information may not be determined by Bank One and may not have been provided to us by third parties who are not independent of the issuer or manager. Certain assets may be carried at cost.

This statement is not an official document for income tax reporting purposes.

When reviewing your Bond quality table, the percentages are rounded to zero when the percentage fore rating category is less than one percent.

When reviewing your Holdings detail, the market value listed for each asset may not equal quantity multiplied by share price due to rounding. The Market value column will always provide the most accurate figure.

Market values noted in the Market reconciliation and Transaction detail are as of the end of the statement period. The market value on the date of the transaction may be different.

Please be aware that the information shown in the Realized gain/(loss) column (found in the Transaction detail section of your statement) is based on TAX COST, even though the assets on your statement may be carried at Book value. Please contact your Advisor if you have questions regarding this information or any part of your statement.

Bank One or its affiliates may receive and accept from time to time 12B-1 fees, shareholder servicing fees, sub-transfer agency fees, network reimbursement fees, or other fees from unaffiliated mutual funds as described in the prospectus for the fund with respect to eligible accounts. Bank One has taken steps to avoid receiving fees with respect to ineligible accounts. If Bank One inadvertently receives any such fees for ineligible accounts, such fees will be returned to the fund's distributors or other payor.

Life insurance values are shown at cash surrender value most recently reported by you or the Insurance Company, except where the value shown is $1.00. If the value is $1.00, we have not received a cash surrender value.

FLORIDA CLIENTS, please note that an action for breach of trust based on matters disclosed in a trust accounting or other written report of the Trustee may be subject to a 6-month statute of limitations from the receipt of the trust accounting or other written report. Questions, please consult your attorney. (FL ST sec. 737.307)

Proprietary and non-proprietary mutual funds and other securities are not insured or guaranteed by the Federal Deposit Insurance Corporation (FDIC) or any other government sponsored agency of the federal or any state government. One Group Mutual Funds are not deposits or obligations of and are not guaranteed by, JPMorgan Chase & Co. or its bank or non-bank affiliates. Affiliates of JPMorgan Chase & Co., including the legal entity providing this statement, receive fees for providing various services to the funds. Prospectuses, fee disclosure statements and annual reports for the One Group Funds are always available. For more information, please contact your advisor, One Group at (800) 480-4111 or logon to www.onegroup.com.

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BANK ONE

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Annual Account Statement

F JAMES SENSENBRENNER JR TRUST
Account number 9572125310
January 1, 2004 - December 31, 2004

BANK ONE TRUST COMPANY, N.A.
111 E WISCONSIN AVE,12TH FLOOR
MILWAUKEE, WI 53202

www.bankone.com

Your Advisor is:
LYNN E PAULL
(414) 977-2027 or (800) 926-4556

Thank you for the opportunity to serve your financial needs. We appreciate your confidence in us.

Please remember to check the Bulletin board (located at the back of your statement) for important messages from Bank One.

Don't hesitate to contact your advisor if you have any questions, comments or concerns.

05038 02057
F JAMES SENSENBRENNER JR
609 FORT WILLIAMS PKWY
ALEXANDRIA VA 22304-1813

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Holdings summary

	Value on December 31, 2004	Value on December 31, 2003	Change in value
Cash equivalents	$35,470.77		
Equities	603,850.86		
Fixed income	214,635.91		
Other	0.00		
Total holdings	**$853,957.54**	$791,931.87	**$62,025.67**
Accruals (income earned but not yet received)	$2,358.38		
Total holdings with accruals	**$856,315.92**		

Income summary

Income	Statement period	January 1 to December 31
Dividends (domestic/foreign/mutual fund income)	$12,101.90	$12,101.90
Interest (taxable/non-taxable)	184.88	184.88
Other income	0.00	0.00
Total income	**$12,286.78**	$12,286.78
Realized gain/(loss)		
	$16,998.50	$16,998.50

The income summary includes taxable and tax-exempt income for both principal and income beneficiaries, please refer to the Transaction detail for an income breakdown. These amounts represent approximate income and gain/(loss) amounts and should not be used for final Internal Revenue Service reporting.

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Market reconciliation

	Statement period	January 1 to December 31
Beginning market value	$791,931.87	$791,931.87
Receipts	272.70	272.70
Disbursements	(16,216.08)	(16,216.08)
Income	12,286.78	12,286.78
Capital gains distributions	16,998.50	16,998.50
Change in asset market value	48,683.77	48,683.77
Ending market value	$853,957.54	$853,957.54

The Market reconciliation provides a summary of all activity in the account. The Receipts and Disbursements categories may include Non-Cash Transactions such as transfers within the account, name change transactions, asset receipts and distributions, and stock split transactions. The Transaction detail section provides an itemized list of all transactions. The Transaction summary provides a summary of cash receipt and disbursement transactions.

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Transaction summary

	Income	Principal
Beginning cash balance 1/1/04	$(272.70)	$272.70
Cash receipts		
Dividends (domestic/foreign/mutual fund income)	$12,101.90	$0.00
Interest (taxable/non-taxable)	184.88	0.00
Other cash receipts	272.70	16,998.50
Total cash receipts	$12,559.48	$16,998.50
Cash disbursements		
Cash disbursements	$(8,609.02)	$(278.70)
Administrative expenses	(3,966.66)	(3,361.70)
Total cash disbursements	$(12,575.68)	$(3,640.40)
Investment transactions		
Purchases	$0.00	$(29,285.28)
Sales and maturities	0.00	15,943.38
Total investment transactions	$0.00	$(13,341.90)
Ending cash balance 12/31/04	$(288.90)	$288.90

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Only the Asset allocation analysis includes mutual fund holdings. The Bond quality and maturity analyses (if applicable) are displayed excluding mutual funds.

Investment objective: Tax-Free Growth and Income

This strategy seeks to provide long-term capital appreciation and tax-exempt current income by investing primarily in equity securities (60% - 80%) and secondarily in tax-exempt fixed income securities (20% - 40%). Principal volatility is expected to be moderate.

Asset allocation

- 4.2% - **Cash equivalents**
- 70.7% - **Equities**
  70.7% - *Mutual funds*
- 25.1% - **Fixed income**
  25.1% - *Mutual funds*

The Asset allocation may not be exactly as described in the investment objective due to Other Asset holdings.

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Holdings detail

Cash equivalents

Very liquid assets

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
ONE GROUP PRIME MONEY MARKET FUND	35,470.770	1.000	$35,470.77	$35,470.77	$0.00	1.73%	$613.64
INCOME CASH	(288.900)	1.000	(288.90)	(288.90)	0.00	0.00%	0.00
PRINCIPAL CASH	288.900	1.000	288.90	288.90	0.00	0.00%	0.00
Total cash equivalents			$35,470.77	$35,470.77	$0.00		$613.64

Equities

Mutual funds

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
ONE GROUP DIVERSIFIED EQUITY FUND	2,714.355	12.260	$33,277.99	$29,442.08	$3,835.91	0.64%	$211.72
ONE GROUP DIVERSIFIED INTERNAT'L FD	858.283	15.850	13,603.79	8,600.00	5,003.79	0.72%	97.84
ONE GROUP EQUITY INCOME FUND	4,257.248	15.300	65,135.89	58,594.87	6,541.02	1.69%	1,102.63
ONE GROUP LARGE CAP GROWTH FUND	5,037.862	15.190	76,525.12	65,000.00	11,525.12	0.00%	0.00
ONE GROUP LARGE CAP VALUE FUND	5,439.059	15.850	86,209.09	68,062.00	18,147.09	1.12%	962.71
ONE GROUP MID CAP GROWTH FUND	6,186.427	24.050	148,302.57	111,288.19	37,014.38	0.00%	0.00
ONE GROUP MID CAP VALUE FUND	7,279.427	18.160	132,194.39	97,994.74	34,199.65	0.61%	800.74
ONE GROUP SMALL CAP GROWTH FUND	1,836.536	12.990	24,506.10	18,000.00	6,506.10	0.00%	0.00

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Holdings detail continued

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Estimated annual income
ONE GROUP SMALL CAP VALUE FUND	954.672	25.240	$24,095.92	$18,000.00	$6,095.92	0.28%	$68.74
Total equities			**$603,850.86**	**$474,981.88**	**$128,868.98**		**$3,244.38**

Fixed income

Mutual funds

Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain(loss)	Current yield	Yield to maturity	Estimated annual income
ONE GROUP INTERMEDIATE TAX-FREE BOND FUND (HLTDX)	9,165.755	11.250	$103,114.74	$95,357.96	$7,756.78	3.91%		$4,032.93
ONE GROUP MUNICIPAL INCOME FUND (HLTAX)	9,164.958	9.890	90,641.43	86,206.15	4,435.28	4.25%		3,849.28
ONE GROUP TAX-FREE BOND FUND (PRBIX)	1,606.134	13.000	20,879.74	19,900.00	979.74	4.46%		931.56
Total fixed income			**$214,635.91**	**$201,464.11**	**$13,171.80**			**$8,813.77**
Total holdings			**$853,957.54**	**$711,916.76**	**$142,040.78**			**$12,671.79**
Accruals (income earned but not yet received)			$2,358.38					
Total holdings with accruals			**$856,315.92**					

Assets identified with an asterisk (*) at the beginning of the asset name are held in the Invested Income Portfolio.

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Transaction detail

			Income	Principal
Beginning cash balance 1/1/04			$(272.70)	$272.70
Date	Description	Realized gain/(loss)	Income	Principal
	COMBINED PURCHASES FOR THE PERIOD 1/ 1/04 - 12/31/04 OF ONE GROUP PRIME MONEY MARKET FUND INVESTMENTS AT TAX COST: $29,285.28			$(29,285.28)
	COMBINED SALES FOR THE PERIOD 1/ 1/04 - 12/31/04 OF ONE GROUP PRIME MONEY MARKET FUND INVESTMENTS AT TAX COST: $-15,943.38			15,943.38
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.023697/SHARE ON 2,714.355 SHARES DUE 1/2/04		$64.32	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED INTERNAT'L FD $0.114372/SHARE ON 858.283 SHARES DUE 1/2/04		98.16	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP EQUITY INCOME FUND $0.021224/SHARE ON 4,257.248 SHARES DUE 1/2/04		90.36	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 12/1/03 TO 12/31/03		348.30	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.045275/SHARE ON 5,439.059 SHARES DUE 1/2/04		246.25	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.025871/SHARE ON 7,279.427 SHARES DUE 1/2/04		188.33	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 12/1/03 TO 12/31/03		320.77	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.020931/SHARE ON 954.672 SHARES DUE 1/2/04		$19.98	
1/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP TAX-FREE BOND FUND DIVIDEND FROM 12/1/03 TO 12/31/03		77.09	
1/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 12/1/03 TO 12/31/03		12.37	
1/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH DECEMBER MONTH END		(276.98)	$(276.98)
1/14/04	CASH DISBURSEMENT TRANSFER TO INCOME			(272.70)
1/14/04	CASH RECEIPT TRANSFER FROM PRINCIPAL		272.70	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP EQUITY INCOME FUND $0.016007/SHARE ON 4,257.248 SHARES DUE 2/2/04		68.15	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 1/1/04 TO 1/31/04		339.13	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 1/1/04 TO 1/31/04		320.77	
2/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP TAX-FREE BOND FUND DIVIDEND FROM 1/1/04 TO 1/31/04		75.49	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
2/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 1/1/04 TO 1/31/04		$12.81	
2/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JANUARY MONTH END		(280.12)	$(280.12)
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP EQUITY INCOME FUND $0.032464/SHARE ON 4,257.248 SHARES DUE 3/1/04		138.21	
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 2/1/04 TO 2/29/04		329.97	
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 2/1/04 TO 2/29/04		302.44	
3/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP TAX-FREE BOND FUND DIVIDEND FROM 2/1/04 TO 2/29/04		75.49	
3/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 2/1/04 TO 2/29/04		11.88	
3/10/04	CASH DISBURSEMENT PAID TO BANK ONE MILWAUKEE DDA#550462366 ACH TRANSFER TO CHECKING ACCT PAID FOR F JAMES SENSENBRENNER JR 075000019-550462366		(2,583.17)	
3/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH FEBRUARY MONTH END		(283.67)	(283.67)

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.015892/SHARE ON 2,714.355 SHARES DUE 4/1/04		$43.14	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP EQUITY INCOME FUND $0.002585/SHARE ON 4,257.249 SHARES DUE 4/1/04		11.01	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 3/1/04 TO 3/31/04		329.97	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.040604/SHARE ON 5,439.059 SHARES DUE 4/1/04		220.85	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.015312/SHARE ON 7,279.427 SHARES DUE 4/1/04		111.46	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 3/1/04 TO 3/31/04		293.28	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.021058/SHARE ON 954.672 SHARES DUE 4/1/04		20.10	
4/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP TAX-FREE BOND FUND DIVIDEND FROM 3/1/04 TO 3/31/04		77.09	
4/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 3/1/04 TO 3/31/04		11.83	

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
4/5/04	CASH DISBURSEMENT PAID TO U S TREASURY FIDUCIARY FEDERAL INCOME TAX **WITX TAX DUE ON FORM 1041 FOR CALENDAR YR RETUR			$(2.00)
4/8/04	CASH DISBURSEMENT PAID TO U S TREASURY FIDUCIARY EST FED INCOME TAX **WITX FEDERAL ESTIMATED TAX			(4.00)
4/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH MARCH MONTH END		$(281.51)	(281.52)
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP EQUITY INCOME FUND $0.019586/SHARE ON 4,257.248 SHARES DUE 5/3/04		83.38	
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 4/1/04 TO 4/30/04		339.13	
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 4/1/04 TO 4/30/04		274.95	
5/3/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP TAX-FREE BOND FUND DIVIDEND FROM 4/1/04 TO 4/30/04		78.70	
5/3/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 4/1/04 TO 4/30/04		11.55	
5/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH APRIL MONTH END		(276.81)	(276.81)

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
5/18/04	MISCELLANEOUS TAX SERVICE FEES COLLECTED 2003 GENERATION SKIPPING REVIEW		$(115.00)	
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP EQUITY INCOME FUND $0.024717/SHARE ON 4,257.248 SHARES DUE 6/1/04		105.23	
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 5/1/04 TO 5/31/04		339.13	
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 5/1/04 TO 5/31/04		293.28	
6/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP TAX-FREE BOND FUND DIVIDEND FROM 5/1/04 TO 5/31/04		78.70	
6/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 5/1/04 TO 5/31/04		12.38	
6/10/04	FIDUCIARY TAX RETURN PREP COLLECTED 2003 FORMS 1041/2		(490.00)	
6/10/04	CASH DISBURSEMENT PAID TO BANK ONE MILWAUKEE DDA#550462366 ACH TRANSFER TO CHECKING ACCT PAID FOR F JAMES SENSENBRENNER JR 075000019-550462366		(1,288.17)	
6/14/04	ADMINISTRATIVE FEES COLLECTED THROUGH MAY MONTH END		(278.82)	$(278.82)

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.019605/SHARE ON 2,714.355 SHARES DUE 7/1/04		$53.21	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP EQUITY INCOME FUND $0.017108/SHARE ON 4,257.248 SHARES DUE 7/1/04		72.83	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 6/1/04 TO 6/30/04		339.13	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.045164/SHARE ON 5,439.059 SHARES DUE 7/1/04		245.65	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.040723/SHARE ON 7,279.427 SHARES DUE 7/1/04		296.44	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 6/1/04 TO 6/30/04		311.61	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.003055/SHARE ON 954.672 SHARES DUE 7/1/04		2.92	
7/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP TAX-FREE BOND FUND DIVIDEND FROM 6/1/04 TO 6/30/04		78.70	
7/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 6/1/04 TO 6/30/04		12.34	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
7/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JUNE MONTH END		$(281.55)	$(281.56)
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP EQUITY INCOME FUND $0.01452/SHARE ON 4,257.248 SHARES DUE 8/2/04		61.82	
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 7/1/04 TO 7/31/04		339.13	
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 7/1/04 TO 7/31/04		302.44	
8/2/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP TAX-FREE BOND FUND DIVIDEND FROM 7/1/04 TO 7/31/04		77.09	
8/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 7/1/04 TO 7/31/04		15.56	
8/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH JULY MONTH END		(275.57)	(275.57)
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP EQUITY INCOME FUND $0.03646/SHARE ON 4,257.248 SHARES DUE 9/1/04		155.22	
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 8/1/04 TO 8/31/04		329.97	
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 8/1/04 TO 8/31/04		339.10	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
9/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP TAX-FREE BOND FUND DIVIDEND FROM 8/1/04 TO 8/31/04		$80.31	
9/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 8/1/04 TO 8/31/04		18.59	
9/10/04	CASH DISBURSEMENT PAID TO BANK ONE MILWAUKEE DDA#550462366 ACH TRANSFER TO CHECKING ACCT - PAID FOR F JAMES SENSENBRENNER JR 075000019-550462366		(2,296.12)	
9/13/04	ADMINISTRATIVE FEES COLLECTED THROUGH AUGUST MONTH END		(276.77)	$(276.77)
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP DIVERSIFIED EQUITY FUND $0.018352/SHARE ON 2,714.355 SHARES DUE 10/1/04		49.81	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP EQUITY INCOME FUND $0.020141/SHARE ON 4,257.248 SHARES DUE 10/1/04		85.75	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 9/1/04 TO 9/30/04		329.97	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP LARGE CAP VALUE FUND $0.046306/SHARE ON 5,439.059 SHARES DUE 10/1/04		251.86	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MID CAP VALUE FUND $0.02841/SHARE ON 7,279.427 SHARES DUE 10/1/04		206.81	

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 9/1/04 TO 9/30/04		$357.43	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP SMALL CAP VALUE FUND $0.026621/SHARE ON 954.672 SHARES DUE 10/1/04		25.41	
10/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP TAX-FREE BOND FUND DIVIDEND FROM 9/1/04 TO 9/30/04		77.09	
10/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 9/1/04 TO 9/30/04		19.19	
10/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH SEPTEMBER MONTH END		(279.05)	$(279.05)
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP EQUITY INCOME FUND $0.01915/SHARE ON 4,257.248 SHARES DUE 11/1/04		81.53	
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 10/1/04 TO 10/31/04		329.97	
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 10/1/04 TO 10/31/04		366.60	
11/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP TAX-FREE BOND FUND DIVIDEND FROM 10/1/04 TO 10/31/04		77.09	

Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
11/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 10/1/04 TO 10/31/04		$21.89	
11/12/04	ADMINISTRATIVE FEES COLLECTED THROUGH OCTOBER MONTH END		(281.91)	$(281.92)
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP EQUITY INCOME FUND $0.05108/SHARE ON 4,257,248 SHARES DUE 12/1/04		217.46	
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP INTERMED TAX-FREE BOND FD DIVIDEND FROM 11/1/04 TO 11/30/04		329.97	
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP MUNICIPAL INCOME FUND DIVIDEND FROM 11/1/04 TO 11/30/04		348.27	
12/1/04	CASH RECEIPT OF DIVIDEND EARNED ON ONE GROUP TAX-FREE BOND FUND DIVIDEND FROM 11/1/04 TO 11/30/04		78.70	
12/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 11/1/04 TO 11/30/04		24.49	
12/10/04	CASH DISBURSEMENT PAID TO BANK ONE MILWAUKEE DDA#550462366 ACH TRANSFER TO CHECKING ACCT PAID FOR F JAMES SENSENBRENNER JR 075000019-550482366		(2,441.56)	
12/13/04	ADMINISTRATIVE FEES COLLECTED THROUGH NOVEMBER MONTH END		(288.90)	(288.91)

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Transaction detail continued

Date	Description	Realized gain/(loss)	Income	Principal
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP SMALL CAP GROWTH FUND $0.058/SHARE ON 1,886.536 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $109.44 ON FEDERAL COST LT CAPITAL GAIN OF $109.44 ON STATE COST	$109.44		$109.44
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP MID CAP VALUE FUND $0.5507/SHARE ON 7,279.427 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $4,008.93 ON FEDERAL COST LT CAPITAL GAIN OF $4,008.93 ON STATE COST	4,008.93		4,008.93
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP SMALL CAP VALUE FUND $2.1798/SHARE ON 954.672 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $2,080.97 ON FEDERAL COST LT CAPITAL GAIN OF $2,080.97 ON STATE COST	2,080.97		2,080.97
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP EQUITY INCOME FUND $2.4627/SHARE ON 4,257.248 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $10,484.45 ON FEDERAL COST LT CAPITAL GAIN OF $10,484.45 ON STATE COST	10,484.45		10,484.45
12/16/04	RECEIVE LT CAPITAL GAINS DISTRIBUTION ON ONE GROUP TAX-FREE BOND FUND $0.1959/SHARE ON 1,606.134 SHARES DUE 12/16/04 LT CAPITAL GAIN OF $314.71 ON FEDERAL COST LT CAPITAL GAIN OF $314.71 ON STATE COST	314.71		314.71
			Income	Principal
Ending cash balance 12/31/04			$(288.90)	$288.90

No pending trades.

Although market values and prices for publicly-traded securities have been obtained from sources or third parties Bank One believes to be reliable, Bank One does not guarantee their accuracy. Certain assets may not be held by Bank One,and their reporting is at the request and for the convenience of the account owner. Certain assets, including, but not limited to, closely held, non-publicly-traded and infrequently traded securities, derivatives, partnership interests, tangible assets, and life insurance policy cash values cannot be readily priced. The valuation, pricing and/or transaction information is not independently verified by Bank One, is reflected as of the last date provided to Bank One and may not be current. Such information may not be determined by Bank One and may not have been provided to us by third parties who are not independent of the issuer or manager. Certain assets may be carried at cost.

This statement is not an official document for income tax reporting purposes.

When reviewing your Bond quality table, the percentages are rounded to zero when the percentage for a rating category is less than one percent.

When reviewing your Holdings detail, the market value listed for each asset may not equal quantity multiplied by share price due to rounding. The Market value column will always provide the most accurate figure.

Market values noted in the Market reconciliation and Transaction detail are as of the end of the statement period. The market value on the date of the transaction may be different.

Please be aware that the information shown in the Realized gain/(loss) column (found in the Transaction detail section of your statement) is based on TAX COST, even though the assets on your statement may be carried at Book value. Please contact your Advisor if you have questions regarding this information or any part of your statement.

Bank One or its affiliates may receive and accept from time to time 12B-1 fees, shareholder servicing fees, sub-transfer agency fees, network reimbursement fees, or other fees from unaffiliated mutual funds as described in the prospectus for the fund with respect to eligible accounts. Bank One has taken steps to avoid receiving fees with respect to ineligible accounts. If Bank One inadvertently receives any such fees for ineligible accounts, such fees will be returned to the fund's distributors or other payor.

Life insurance values are shown at cash surrender value most recently reported by you or the Insurance Company, except where the value shown is $1.00. If the value is $1.00, we have not received a cash surrender value.

FLORIDA CLIENTS, please note that an action for breach of trust based on matters disclosed in a trust accounting or other written report of the Trustee may be subject to a 6-month statute of limitations from the receipt of the trust accounting or other written report. Questions, please consult your attorney. (FL ST sec. 737.307)

Proprietary and non-proprietary mutual funds and other securities are not insured or guaranteed by the Federal Deposit Insurance Corporation (FDIC) or any other government sponsored agency of the federal or any state government. One Group Mutual Funds are not deposits or obligations of and are not guaranteed by, JPMorgan Chase & Co. or its bank or non-bank affiliates. Affiliates of JPMorgan Chase & Co., including the legal entity providing this statement, receive fees for providing various services to the funds. Prospectuses, fee disclosure statements and annual reports for the One Group Funds are always available. For more information, please contact your advisor, One Group at (800) 480-4111 or logon to www.onegroup.com.

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Annual Account Statement

CHERYL W SENSENBRENNER CUSTODY
Account number 9500024600
January 1, 2004 - December 31, 2004

BANK ONE TRUST COMPANY, N.A.
111 E WISCONSIN AVE,12TH FLOOR
MILWAUKEE, WI 53202

www.bankone.com

Your Advisor is:
LYNN E PAULL
(414) 977-2027 or (800) 926-4556

Thank you for the opportunity to serve your financial needs. We appreciate your confidence in us.

Please remember to check the Bulletin board (located at the back of your statement) for important messages from Bank One.

Don't hesitate to contact your advisor if you have any questions, comments or concerns.

CHERYL SENSENBRENNER
609 FORT WILLIAMS PARKWAY
ALEXANDRIA VA 22304

CHERYL W SENSENBRENNER CUSTODY
Account number: 9500094600 January 1 - December 31, 2004

Holdings summary

	Value on December 31, 2004	Value on December 31, 2003	Change in value
Cash equivalents	$72,856.53		
Equities	96,354.70		
Fixed income	0.00		
Other	0.00		
Total holdings	$169,211.23	$168,614.45	$596.78
Accruals (income earned but not yet received)	$1,253.24		
Total holdings with accruals	$170,464.47		

Income summary

Income	Statement period	January 1 to December 31
Dividends (domestic/foreign/mutual fund income)	$4,368.29	$4,368.29
Interest (taxable/non-taxable)	694.13	694.13
Other income	0.00	0.00
Total income	$5,062.42	$5,062.42
Realized gain/(loss)		
	$0.00	$0.00

The income summary includes taxable and tax-exempt income for both principal and income beneficiaries, please refer to the Transaction detail for an income breakdown. These amounts represent approximate income and gain/(loss) amounts and should not be used for final Internal Revenue Service reporting.

Market reconciliation

	Statement period	January 1 to December 31
Beginning market value	$168,614.45	$168,614.45
Receipts	22,125.77	22,125.77
Disbursements	(37,125.77)	(37,125.77)
Income	5,062.42	5,062.42
Capital gains distributions	0.00	0.00
Change in asset market value	10,534.36	10,534.36
Ending market value	$169,211.23	$169,211.23

The Market reconciliation provides a summary of all activity in the account. The Receipts and Disbursements categories may include Non-Cash Transactions such as transfers within the account, name change transactions, asset receipts and distributions, and stock split transactions. The Transaction detail section provides an itemized list of all transactions. The Transaction summary provides a summary of cash receipt and disbursement transactions.

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Transaction summary

	Income	Principal
Beginning cash balance 1/1/04	$(22,125.77)	$22,125.77
Cash receipts		
Dividends (domestic/foreign/mutual fund income)	$4,368.29	$0.00
Interest (taxable/non-taxable)	694.13	0.00
Other cash receipts	22,125.77	0.00
Total cash receipts	$27,188.19	$0.00
Cash disbursements		
Cash disbursements	$(15,000.00)	$(22,125.77)
Administrative expenses	0.00	0.00
Total cash disbursements	$(15,000.00)	$(22,125.77)
Investment transactions		
Purchases	$0.00	$(5,062.42)
Sales and maturities	0.00	15,000.00
Total investment transactions	$0.00	$9,937.58
Ending cash balance 12/31/04	$(9,937.58)	$9,937.58

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CHERYL W SENSENBRENNER CUSTODY
Account number: 9500094600 January 1 - December 31, 2004

Only the Asset allocation analysis includes mutual fund holdings. The Bond quality and maturity analyses (if applicable) are displayed excluding mutual funds.

Investment objective: Limited to Cash Management Only

This strategy seeks to provide a high level of current income, liquidity and principal stability by investing in high-quality money market securities. Principal volatility is not expected to be an issue.

Asset allocation

43.1% - Cash equivalents

56.9% - Equities

56.9% - *Consumer non-durable*

The Asset allocation may not be exactly as described in the Investment objective due to Other Asset holdings.

CHERYL W SENSENBRENNER CUSTODY
Account number: 850009480 January 1 - December 31, 2004

MAY 04 2005 14:20 FR BANK-ONE-MISC-FRU-BNK 4147652979 TO 912022253190 P.09/17

Holdings detail

Cash equivalents

Very liquid assets Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain/(loss)	Current yield	Estimated annual income
ONE GROUP PRIME MONEY MARKET FUND	72,856.530	1.000	$72,856.53	$72,856.53	$0.00	1.73%	$1,260.42
INCOME CASH	(9,937.580)	1.000	(9,937.58)	(9,937.58)	0.00	0.00%	0.00
PRINCIPAL CASH	9,937.580	1.000	9,937.58	9,937.58	0.00	0.00%	0.00
Total cash equivalents			**$72,856.53**	**$72,856.53**	**$0.00**		**$1,260.42**

Equities

Consumer non-durable Description	Quantity	Share price or % of par	Market value	Tax cost	Unrealized gain/(loss)	Current yield	Estimated annual income
ALTRIA GROUP INC	1,577.000	61.100	$96,354.70	$0.00	$96,354.70	4.78%	$4,604.84
Total equities			**$96,354.70**	**$0.00**	**$96,354.70**		**$4,604.84**
Total holdings			**$169,211.23**	**$72,856.53**	**$96,354.70**		**$5,865.26**
Accruals (income earned but not yet received)			$1,253.24				
Total holdings with accruals			**$170,464.47**				

Assets identified with an asterisk (*) at the beginning of the asset name are held in the Invested Income Portfolio.

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Transaction detail

		Income	Principal
Beginning cash balance 1/1/04		$(22,125.77)	$22,125.77
Cash receipts			
Domestic dividends			
Date	*Description*	*Income*	*Principal*
1/9/04	CASH RECEIPT OF DIVIDEND EARNED ON ALTRIA GROUP INC $0.68/SHARE ON 1,577 SHARES DUE 1/9/04	$1,072.36	
4/12/04	CASH RECEIPT OF DIVIDEND EARNED ON ALTRIA GROUP INC $0.68/SHARE ON 1,577 SHARES DUE 4/12/04	1,072.36	
7/9/04	CASH RECEIPT OF DIVIDEND EARNED ON ALTRIA GROUP INC $0.68/SHARE ON 1,577 SHARES DUE 7/9/04	1,072.36	
10/12/04	CASH RECEIPT OF DIVIDEND EARNED ON ALTRIA GROUP INC $0.73/SHARE ON 1,577 SHARES DUE 10/12/04	1,151.21	
Total domestic dividends		$4,368.29	$0.00
Taxable interest			
1/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 12/1/03 TO 12/31/03	49.34	
2/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 1/1/04 TO 1/31/04	46.48	

Transaction detail continued

Date	Description	Income	Principal
3/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 2/1/04 TO 2/29/04	$42.53	
4/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 3/1/04 TO 3/31/04	45.32	
5/3/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 4/1/04 TO 4/30/04	45.06	
6/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 5/1/04 TO 5/31/04	48.26	
7/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 6/1/04 TO 6/30/04	50.36	
8/2/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 7/1/04 TO 7/31/04	63.28	
9/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 8/1/04 TO 8/31/04	71.08	
10/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 9/1/04 TO 9/30/04	67.97	

Transaction detail continued

Date	Description	Income	Principal
11/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 10/1/04 TO 10/31/04	$78.19	
12/1/04	CASH RECEIPT OF INTEREST EARNED ON ONE GROUP PRIME MONEY MARKET FUND INTEREST FROM 11/1/04 TO 11/30/04	86.26	
Total taxable interest		$694.13	$0.00
Other cash receipts			
1/13/04	CASH RECEIPT TRANSFER FROM PRINCIPAL	22,125.77	
Total other cash receipts		$22,125.77	$0.00
Total cash receipts		**$27,188.19**	**$0.00**

Cash disbursements

Other cash disbursements

Date	Description	Income	Principal
1/13/04	CASH DISBURSEMENT TRANSFER TO INCOME		$(22,125.77)
8/23/04	CASH DISBURSEMENT PAID TO BANK ONE DDA #40009341 ACH TRANSFER TO CHECKING ACCT PAID FOR CHERYL SENSENBRENNER 075000019-40009341	$(15,000.00)	
Total other cash disbursements		$(15,000.00)	$(22,125.77)
Total cash disbursements		**$(15,000.00)**	**$(22,125.77)**

Transaction detail continued

Investment transactions

Purcheses

Date	Description	Income	Principal
	COMBINED PURCHASES FOR THE PERIOD 1/ 1/04 - 12/31/04 OF ONE GROUP PRIME MONEY MARKET FUND INVESTMENTS AT TAX COST: $5,062.42		$(5,062.42)
Total purchases		$0.00	$(5,062.42)

Sales and maturities

	COMBINED SALES FOR THE PERIOD 1/ 1/04 - 12/31/04 OF ONE GROUP PRIME MONEY MARKET FUND INVESTMENTS AT TAX COST: $-15,000.00		15,000.00
Total sales and maturities		$0.00	$15,000.00
Total investment transactions		**$0.00**	**$9,937.58**
		Income	*Principal*
Ending cash balance 12/31/04		$(9,937.58)	$9,937.58

No pending trades.

4907

Although market values and prices for publicly-traded securities have been obtained from sources or third parties Bank One believes to be reliable, Bank One does not guarantee their accuracy. Certain assets may not be held by Bank One,and their reporting is at the request and for the convenience of the account owner. Certain assets, including, but not limited to, closely held, non-publicly-traded and infrequently traded securities, derivatives, partnership interests, tangible assets, and life insurance policy cash values cannot be readily priced. The valuation, pricing and/or transaction information is not independently verified by Bank One, is reflected as of the last date provided to Bank One and may not be current. Such information may not be determined by Bank One and may not have been provided to us by third parties who are not independent of the issuer or manager. Certain assets may be carried at cost.

This statement is not an official document for income tax reporting purposes.

When reviewing your Bond quality table, the percentages are rounded to zero when the percentage for a rating category is less than one percent.

When reviewing your Holdings detail, the market value listed for each asset may not equal quantity multiplied by share price due to rounding. The Market value column will always provide the most accurate figure.

Market values noted in the Market reconciliation and Transaction detail are as of the end of the statement period. The market value on the date of the transaction may be different.

Please be aware that the information shown in the Realized gain/(loss) column (found in the Transaction detail section of your statement) is based on TAX COST, even though the assets on your statement may be carried at Book value. Please contact your Advisor if you have questions regarding this information or any part of your statement.

Bank One or its affiliates may receive and accept from time to time 12B-1 fees, shareholder servicing fees, sub-transfer agency fees, network reimbursement fees, or other fees from unaffiliated mutual funds as described in the prospectus for the fund with respect to eligible accounts. Bank One has taken steps to avoid receiving fees with respect to ineligible accounts. If Bank One inadvertently receives any such fees for ineligible accounts, such fees will be returned to the fund's distributors or other payor.

Life insurance values are shown at cash surrender value most recently reported by you or the Insurance Company, except where the value shown is $1.00. If the value is $1.00, we have not received a cash surrender value.

FLORIDA CLIENTS, please note that an action for breach of trust based on matters disclosed in a trust accounting or other written report of the Trustee may be subject to a 6-month statute of limitations from the receipt of the trust accounting or other written report. Questions, please consult your attorney. (FL ST sec. 737.307)

Proprietary and non-proprietary mutual funds and other securities are not insured or guaranteed by the Federal Deposit Insurance Corporation (FDIC) or any other government sponsored agency of the federal or any state government. One Group Mutual Funds are not deposits or obligations of and are not guaranteed by, JPMorgan Chase & Co. or its bank or non-bank affiliates. Affiliates of JPMorgan Chase & Co., including the legal entity providing this statement, receive fees for providing various services to the funds. Prospectuses, fee disclosure statements and annual reports for the One Group Funds are always available. For more information, please contact your advisor, One Group at (800) 480-4111 or logon to www.onegroup.com.

4909

CHERYL W SENSENBRENNER CUSTODY
Account number: 9500894600 January 1 - December 31, 2004

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2005 JUN 14 PM 4:37

(Office Use Only)

4911

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A Page 1 of 4
For use by Members, officers, and employees

José E. Serrano
(Full Name)

2227 Rayburn HOB Washington, DC 20515 — 202-225-4361
(Mailing Address) — Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representative — State: NY — District: 16	☐ Officer Or Employee — Employing Office	A $200 penalty shall be assessed against anyone who files more than 30 days late.
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $286 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $286 from one source)? If yes, complete and attach Schedule VII.	Yes ☐ No ☑
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☐ No ☑
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☐ No ☑	IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☐ No ☑		Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	J. E. Serrano	6/14/05

SCHEDULE I - EARNED INCOME

Name José E. Serrano

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
NYS Employee Retirement System	Pension	$14,000
Ridgewood Homes	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name José E. Serrano

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
SP	SEP IRA (Putman Funds)				
	Discovery SEP IRA	$1,001 - $15,000	reinvested	NONE	Other
	Cap.Opportunities M SEP IRA	$1,001 - $15,000	reinvested	NONE	Other
	Equity Income SEP IRA	$1,001 - $15,000	reinvested	NONE	Other
	George Putnam Fund of Boston SEP IRA	$1,001 - $15,000	reinvested	NONE	Other
	Cap. Opportunities C SEP IRA	$1,001 - $15,000	reinvested	NONE	Other

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name José E. Serrano

	International Capital Opps. SEP IRA	$1,001 - $15,000	reinvested	NONE	Other
	Voyager SEP IRA	$1,001 - $15,000	reinvested	NONE	Other
SP	Ridgewood Construction Profit Sharing Plan	$15,001 - $50,000	reinvested	NONE	Other
DC	UTMA (MSF Funds)				
	Columbia Young Investor	$1,001 - $15,000	reinvested	NONE	Other

PETE SESSIONS
32ND DISTRICT, TEXAS

COMMITTEE ON RULES

COMMITTEE ON THE BUDGET

COMMITTEE ON FINANCIAL SERVICES (ON LEAVE)

RESULTS CAUCUS CHAIRMAN

Congress of the United States
House of Representatives

1514 LONGWORTH HOUSE OFFICE BUILDING
WASHINGTON, DC 20515-4332
TELEPHONE: 202.225.2231
FAX: 202.225.5878

DISTRICT OFFICE:
PARK CENTRAL VII
12750 MERIT DRIVE
SUITE 1434
DALLAS, TEXAS 75251
TELEPHONE: 972.392.0505
FAX: 972.392.0515

e-mail: petes@mail.house.gov
web page: www.house.gov/sessions/

May 13, 2005

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Mr. Jeff Trandahl
Clerk
Office Of Clerk
U. S. House Of Representatives
The Capitol
H-154
Washington, D.C. 20515

LEGISLATIVE RESOURCE CENTER
2005 MAY 13 AM 10: 15
U.S. HOUSE OF REPRESENTATIVES

MC

Dear Jeff:

I am writing to you in regards to my 2004 Financial Disclosure Statement. Particularly, I wanted to write this cover letter to my 2004 Financial Disclosure Statement to just call to your attention three items that were previously listed on my 2003 Financial Disclosure Statement, but are not listed on my 2004 statement.

My US Government TSP is not listed, as it has come to my attention that I do not need to have it listed on this form. Moreover, the SBC Stock Options and MCI WorldCom positions from 2003 are currently worthless, should they gain value during this next year, they will then be added to my statement for next year.

If you have any questions, please feel free to contact me or Scott Cunningham of my office staff at 5.2231. Thank you for your continued service to the House.

Sincerely,

Pete Sessions
Member of Congress

PS/sc

PRINTED ON RECYCLED PAPER

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
2005 MAY 13 AM 10: 15
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only)
HAND DELIVERED

Pete Sessions
(Full Name)

P.O. Box 38585 Dallas, TX 75238
(Mailing Address)

214.874.0225
Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives — State: TX, District: 32	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☑ No ☐	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts--	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☐
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☐

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Pete Sessions	5.11.05

4916

SCHEDULE II - PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

Name	

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount

SCHEDULE I - EARNED INCOME

Name Pete Sessions

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Southwestern Bell Internet Services	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Pete Sessions

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
SBC	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
Fidelity Advisor Group	$100,001 - $250,000	DIVIDENDS	$1,001 - $2,500	
AT&T	$1 - $1,000	DIVIDENDS	$1 - $200	
Verizon	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
Dallas Telco	$1,001 - $15,000	INTEREST	$1 - $200	
Lincoln Life	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Pete Sessions

	Cisco-IRA	$15,001 - $50,000	CAPITAL GAINS	NONE	
	American Century	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	CitiGroup-IRA	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
	Texas Utilities-IRA	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Kraft Foods-IRA	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Exxon Mobil-IRA	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Stephens Money Market	$1,001 - $15,000	INTEREST	$201 - $1,000	
	CitiGroup	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	PepsiCo	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	USAA Annuity	$1,001 - $15,000	INTEREST	NONE	P
JT	Lucent	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	American Century	$1,001 - $15,000	DIVIDENDS	$1,001 - $2,500	
JT	Dreyfus	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
JT	Congressional Credit	$50,001 - $100,000	INTEREST	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Pete Sessions

JT	Exxon Mobil	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	
JT	NuVeen	$15,001 - $50,000	CAPITAL GAINS	$201 - $1,000	
JT	Oppenheimer	$1,001 - $15,000	CAPITAL GAINS	$1 - $200	
JT	USAA Tax Exempt	$1,001 - $15,000	INTEREST	$1 - $200	
JT	USAA Money Market	$1 - $1,000	INTEREST	$1 - $200	
JT	Property in Hunt, TX	$1,001 - $15,000		Less than 2 acres	
JT	Avaya	$1 - $1,000	DIVIDENDS	NONE	
JT	Dallas Telco CU	$1 - $1,000	INTEREST	$1 - $200	
SP	BellSouth	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	SBC	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	Stevens Money Market	$1 - $1,000	INTEREST	$1 - $200	
SP	Cisco-IRA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	EMC Corp-IRA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	McData Corp-IRA	$1,001 - $15,000	DIVIDENDS	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Pete Sessions

SP	Fidelity Advisor-IRA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
DC	ExxonMobil	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
DC	SBC	$1,001 - $15,000	DIVIDENDS	$1 - $200	
DC	USAA	$15,001 - $50,000	INTEREST	$201 - $1,000	
DC	BellSouth	$1 - $1,000	DIVIDENDS	$1 - $200	
DC	AT&T Wireless	$1,001 - $15,000	DIVIDENDS	NONE	
DC	Cisco	$1,001 - $15,000	DIVIDENDS	$1 - $200	
DC	CitiGroup Inc	$1,001 - $15,000	DIVIDENDS	$1 - $200	
DC	Lucent	$1 - $1,000	DIVIDENDS	$1 - $200	
DC	PepsiCo	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
DC	TXU	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
DC	Quest	$1 - $1,000	DIVIDENDS	$1 - $200	
DC	AT&T	$1,001 - $15,000	DIVIDENDS	$1 - $200	
DC	BellSouth	$1,001 - $15,000	DIVIDENDS	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Pete Sessions

DC	Cisco	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
DC	Quest	$1 - $1,000	DIVIDENDS	$1 - $200	
DC	Fidelity Growth Advisor	$15,001 - $50,000	DIVIDENDS	$1 - $200	
DC	SBC	$1,001 - $15,000	DIVIDENDS	$1 - $200	

SCHEDULE IV - TRANSACTIONS

Name Pete Sessions

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction

SCHEDULE V - LIABILITIES

Name	

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability

SCHEDULE VI - GIFTS

Name	

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Pete Sessions

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
International Dairy Foods Association	Jan. 18-20, 2004	Dallas, TX--Ft. Lauderdale, FL--Washington, D.C.	Y	Y	N	N/A
Down Syndrome Research and Treatment Foundation	March 19-21, 2004	Washington, D.C.--San Jose, CA--Dallas, TX	Y	Y	Y	2 days

SCHEDULE VIII - POSITIONS

Name Pete Sessions

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Executive Committee	Circle Ten Council Boy Scouts of America
Board of Management	East Dallas YMCA
Advisory Board	Dallas Northeast Chamber of Commerce
Advisory Board	Disciples of Holy Trinity

SCHEDULE IX - AGREEMENTS

Name	

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Pete Sessions

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
International Dairy Foods Association	Jan. 18-20, 2004	Dallas, TX--Ft. Lauderdale, FL--Washington, D.C.	Y	Y	N	N/A
Down Syndrome Research and Treatment Foundation	March 19-21, 2004	Washington, D.C.--San Jose, CA--Dallas, TX	Y	Y	Y	2 days

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
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U.S. HOUSE OF REPRESENTATIVES

MC

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

Pete Sessions
(Full Name)

P.O. Box 38585 Dallas, TX 75238 — 214.874.0225
(Mailing Address) — Daytime Telephone:

(Office Use Only)

Filer Status	☑ Member of the U.S. House of Representatives — State: TX, District: 32	☐ Officer Or Employee	Employing Office
Report Type	☐ Annual (May 15)	☑ Amendment	☐ Termination — Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☑ No ☐
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☐ No ☑	IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☐ No ☑		Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION – ANSWER EACH OF THESE QUESTIONS

Trusts--	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☐
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☐

CERTIFICATION – THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Pete Sessions	6/2/05

4931

SCHEDULE I - EARNED INCOME

Name Pete Sessions

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Southwestern Bell Internet Services	Spouse Salary	N/A

SCHEDULE II - PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

Name	

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Pete Sessions

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.		BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	SBC	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Fidelity Advisor Group	$100,001 - $250,000	DIVIDENDS	$1,001 - $2,500	
	AT&T	$1 - $1,000	DIVIDENDS	$1 - $200	
	Verizon	$1,001 - $15,000	DIVIDENDS/DIVIDENDS	$201 - $1,000	
	Dallas Telco	$1,001 - $15,000	INTEREST	$1 - $200	
	Lincoln Life	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Pete Sessions

	Cisco-IRA	$15,001 - $50,000	CAPITAL GAINS	NONE	
	American Century	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	CitiGroup-IRA	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
	Texas Utilities-IRA	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Kraft Foods-IRA	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Exxon Mobil-IRA	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Stephens Money Market	$1,001 - $15,000	INTEREST	$201 - $1,000	
	CitiGroup	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	PepsiCo	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	USAA Annuity	$1,001 - $15,000	INTEREST	NONE	
JT	Lucent	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	American Century	$1,001 - $15,000	DIVIDENDS	$1,001 - $2,500	
JT	Dreyfus	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
JT	Congressional Credit	$50,001 - $100,000	INTEREST	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Pete Sessions

JT	Exxon Mobil	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	
JT	NuVeen	$15,001 - $50,000	CAPITAL GAINS	$201 - $1,000	
JT	Oppenheimer	$1,001 - $15,000	CAPITAL GAINS	$1 - $200	
JT	USAA Tax Exempt	$1,001 - $15,000	INTEREST	$1 - $200	
JT	USAA Money Market	$1 - $1,000	INTEREST	$1 - $200	
JT	Property in Hunt, TX	$1,001 - $15,000		Less than 2 acres	
JT	Avaya	$1 - $1,000	DIVIDENDS	NONE	
JT	Dallas Telco CU	$1 - $1,000	INTEREST	$1 - $200	
SP	BellSouth	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	SBC	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	Stevens Money Market	$1 - $1,000	INTEREST	$1 - $200	
SP	Cisco-IRA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	EMC Corp-IRA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	McData Corp-IRA	$1,001 - $15,000	DIVIDENDS	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Pete Sessions

SP	Fidelity Advisor-IRA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
DC	ExxonMobil	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
DC	SBC	$1,001 - $15,000	DIVIDENDS	$1 - $200	
DC	USAA	$15,001 - $50,000	INTEREST	$201 - $1,000	
DC	BellSouth	$1 - $1,000	DIVIDENDS	$1 - $200	
DC	AT&T Wireless	$1,001 - $15,000	DIVIDENDS	NONE	
DC	Cisco	$1,001 - $15,000	DIVIDENDS	$1 - $200	
DC	CitiGroup Inc	$1,001 - $15,000	DIVIDENDS	$1 - $200	
DC	Lucent	$1 - $1,000	DIVIDENDS	$1 - $200	
DC	PepsiCo	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
DC	TXU	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
DC	Quest	$1 - $1,000	DIVIDENDS	$1 - $200	
DC	AT&T	$1,001 - $15,000	DIVIDENDS	$1 - $200	
DC	BellSouth	$1,001 - $15,000	DIVIDENDS	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Pete Sessions

DC	Cisco	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
DC	Quest	$1 - $1,000	DIVIDENDS	$1 - $200	
DC	Fidelity Growth Advisor	$15,001 - $50,000	DIVIDENDS	$1 - $200	
DC	SBC	$1,001 - $15,000	DIVIDENDS	$1 - $200	

SCHEDULE IV - TRANSACTIONS

Name	

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction

SCHEDULE V - LIABILITIES

Name	

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability

SCHEDULE VI - GIFTS

Name	

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Pete Sessions

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
International Dairy Foods Association	Jan. 18-20, 2004	Dallas, TX--Ft. Lauderdale, FL--Washington, D.C.	Y	Y	N	N/A
Down Syndrome Research and Treatment Foundation	March 19-21, 2004	Washington, D.C.--San Jose, CA--Dallas, TX	Y	Y	Y	2 days

SCHEDULE VIII - POSITIONS

Name Pete Sessions

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Executive Committee	Circle Ten Council Boy Scouts of America
Board of Management	East Dallas YMCA
Advisory Board	Dallas Northeast Chamber of Commerce
Advisory Board	Disciples of Holy Trinity

SCHEDULE IX - AGREEMENTS

Name	

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

HAND DELIVERED

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UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

(Office Use Only)

John B. Shadegg
(Full Name)

306 Cannon HOB Washington, DC 20515
(Mailing Address)

(202) 225-3361
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representative — State: AZ, District: 03	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☑ No ☐
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☐ No ☑	IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑ No ☐		**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and wilfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	J. Shadegg	May 16, 2005

4945

SCHEDULE I - EARNED INCOME

Name John B. Shadegg

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Washington School District	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name John B. Shadegg

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
Raymond James Financial Services-Alliance Tech Fund-IRA	$15,001 - $50,000	DIVIDENDS	N/A	
Raymond James Financial Services-Alliance Tech Fund-IRA	$15,001 - $50,000	DIVIDENDS	N/A	
Arizona State Retirement Fund P.O. Box 33910, Phoenix, AZ	$50,001 - $100,000	INTEREST	N/A	
1/4 Interest in Family Summer home-Prescott, AZ	$50,001 - $100,000	RENT	$201 - $1,000	

SCHEDULE V - LIABILITIES

Name John B. Shadegg

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
JT	Sallie Mae	PLUS Loan	$100,001 - $250,000
DC	Sallie Mae	Student Loan	$15,001 - $50,000
JT	National Bank of Arizona	Signature Loan	$10,001 - $15,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name John B. Shadegg

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Heritage Foundation	Jan. 21-23	Wash., D.C.--Baltimore, MD--Wash., D.C.	Y	Y	N	N/A
Club for Growth	Feb. 19-21	Phoenix, AZ--Palm Beach, FL--Phoenix, AZ	Y	Y	N	N/A
Cerner, Corp.	April 16-17	Pheonix, AZ--San Diego, CA--Phoenix, AZ	Y	Y	Y	N/A

SCHEDULE VIII - POSITIONS

Name John B. Shadegg

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board of Directors	Arizona Economic Forum
Board of Directors	Salvation Army
Board of Directors	Friends of Lake Powell, Inc.
Director	Duck Guides, LTD.
Board of Directors	Arizona Center for Public Policy

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2005 JUN 14 PM 5:45
(Office Use Only)
U.S. HOUSE OF REPRESENTATIVES

A $200 penalty shall be assessed against anyone who files more than 30 days late.

The Honorable E. Clay Shaw, Jr.
(Full Name)

1236 Longworth House Office Building Washington, DC 20515
(Mailing Address)

202-225-3026
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives — State: FL District: 22	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☐ No ☑	VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☑ No ☐
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑ No ☐		**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		6/9/05

4951

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name The Honorable E. Clay Shaw, Jr.

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
Dania Farms, Inc., Wholesale Nursery, 706 N. Federal Highway, Dania, FL	$1,000,001 - $5,000,000	DIVIDENDS	$15,001 - $50,000	
Shaw Land Company, Family Partnership-Timberland located in Sumpter Co., ALA., Lauderdale Co., Kemper Co., Miss.	$1,000,001 - $5,000,000	RENT, Interest, Cap. Gains	$50,001 - $100,000	E
Dania Farms Ltd.-Assets include Real Estate-706 N. Federal Highway, Dania, FL (Interest in 40 acres) Farmland in South Dade County, Redlands area on Coral Reef Drive.	$5,000,001 - $25,000,000	RENT	$5,001 - $15,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name The Honorable E. Clay Shaw, Jr.

	Congressional Federal Credit Union (checking)	$1,001 - $15,000	INTEREST	$201 - $1,000	
	Northern Trust	$1,001 - $15,000	INTEREST	$201 - $1,000	
	Arvida JMB Partnership	$1,001 - $15,000	CAPITAL GAINS	$1 - $200	
	Munder Net net FD CLB	$1,001 - $15,000	DIVIDENDS	NONE	
	Motorola	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	New River Land Co., Inc., Office building @ 300 S.E. 17th Street	$1,000,001 - $5,000,000	DIVIDENDS	$15,001 - $50,000	
	Microsoft Corp.	$1,001 - $15,000	DIVIDENDS	$1,001 - $2,500	
	Wachovia (formerly First Union Corp.)	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	FedEx Corp	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Timberland on Hwy. 80, Cuba, AL.	$250,001 - $500,000	NONE	NONE	
	Vacation Home in Cashiers, N.C.	$250,001 - $500,000	RENT	$5,001 - $15,000	
	NABI, Inc.	None	DIVIDENDS	NONE	S
	Syntroleum	$1,001 - $15,000	NONE	NONE	
	AT&T	None	DIVIDENDS	$1 - $200	S

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name The Honorable E. Clay Shaw, Jr.

	Zhone Tech (formerly Tellium)	$1,001 - $15,000	NONE	NONE	
	IVAX	None	DIVIDENDS	NONE	S
	Liberty Media Corp.	$1,001 - $15,000	NONE	NONE	
	Stewart Enterprises	$1,001 - $15,000	NONE	NONE	Other
	Flextronics International Ltd.	$1,001 - $15,000	NONE	NONE	
	WalMart	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Nasdaq-100	None	DIVIDENDS	NONE	S
	Pharmion Corp.	None	NONE	NONE	S
	Pimco Commodity Ret	$1,001 - $15,000	NONE	$1 - $200	P
	Comcast Corp, CLA	$1,001 - $15,000	NONE	NONE	Other
	* Genzyme Corp.	$1,001 - $15,000	NONE	NONE	Other
	REGEN Biologies Inc.	$15,001 - $50,000	NONE	NONE	P
	Santarus Inc.	$15,001 - * $50,000	NONE	NONE	P
	* Inadvertently omitted on previous reports				

SCHEDULE IV - TRANSACTIONS

Name The Honorable E. Clay Shaw, Jr.

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Pharmion Corp.	S	05-20-04	$15,001 - $50,000
	Pimco Commodity RET	P	01-06-04	$1,001 - $15,000
	Comcast Corp, CLA*	Other	2/15/05	$1,001 - $15,000
	Genzyme Corp.*	Other	09/09/03	$1,001 - $15,000
	REGEN Biologies Inc.	P	04/29/04	$15,001 - $50,000
	Stewart Enterprises*	Other	11/05/03	$1,001 - $15,000
	Shaw Land Company traded land in Clark, Co., Mississippi, Choctaw Co. and Sumpter Co., Alabama	E	10-15-04	Even Exchange
	NABI Biopharmaceuticals	S	06-10-04	$15,001 - $50,000
	NASDAQ 100 TR	S	03-24-04	$1,001 - $15,000
	AT&T	S	1-28-04	$1,001 - $15,000
	IVAX	S	3-24-04	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name The Honorable E. Clay Shaw, Jr.

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Santarus Inc.	P	06-03-04	$15,001 - $50,000
	Santarus Inc.	P	06-10-04	$15,001 - $50,000
	Santarus Inc.	P	11-16-04	$15,001 - $50,000
	* Inadvertently omitted on previous reports			

SCHEDULE V - LIABILITIES

Name The Honorable E. Clay Shaw, Jr.

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Nation's Bank Bank of America (Formerly Nation's Bank)	Note and mortgage on 300 S.E. 17th Street (by New River Land Co., Inc.) guarantor	$500,001 - $1,000,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name The Honorable E. Clay Shaw, Jr.

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Congressional Sportsmen's Foundation	March 20 - March 21, 2004	Fort Lauderdale, FL -- Duck Key, FL -- Fort Lauderdale, FL	Y	Y	Y	N/A
African Wildlife Foundation	June 28, 2004 -- July 4, 2004	Washington, D.C. -- Tanzania --Washington, D.C.	Y	Y	Y	N/A

SCHEDULE VIII - POSITIONS

Name The Honorable E. Clay Shaw, Jr.

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Director / Officer	Dania Farms, Inc.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2005 MAY 12 PM 1:19
U.S. HOUSE OF REPRESENTATIVES

MC

(For Use Only)

CHRISTOPHER SHAYS
(Full Name)

37 BEACON STREET
(Mailing Address)

BRIDGEPORT, CT 06605

Daytime Telephone: 202/225-5541

Filer Status	[X] Member of the U.S. House of Representatives — State: CT District: 4	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [X]	No [ ]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Christopher Shays	5/12/05

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SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	PEACE CORPS	spouse salary	N/a
	CT TEACHERS RETIREMENT FUND	spouse pension	N/a
	CT STATE EMPLOYEE RETIREMENT	state retirement	$1,800.60

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP.		SP					X								X										X								P
DC,	*Examples:*		Mega Corp. Stock																														
			Simon & Schuster	Indefinite																	Royalties									X			
JT			1st Bank of Paducah, KY accounts					X									X										X						
JT	Wells Fargo Mortgage Escrow				X												X						X										
JT	Astoria Mortgage Escrow				X												X						X										
JT	Peoples Bank Escrow						X										X							X									
JT	Wright Patman FCU						X										X							X									
JT	Rec. Vehicle					X										X										X							P

For additional assets and unearned income, use next page.

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Name SHAYS | Page 4 of 6

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-04		X								
JT	Rec. Vehicle	X			9-17-04		X								

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
ROSS PEROT	COMMEMORATIVE SWORD ON PLAQUE given at CEREMONY in VA SECRETARY'S OFFICE	$480

Use additional sheets if more space is required.

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	HUMAN RIGHTS CAMPAIGN	MAR 6-7	CT → LA → CT	Y	Y	N	N
	NY INSTITUTE OF TECHNOLOGY	MAY 13-14	DC → NY → DC	Y	N	N	N
	AIPAC	MAY 23-24	CT → FL → CT	Y	N	N	N
	NAACP	JULY 12	CT · Philadelphia → DC	N	N	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

2

HAND DELIVERED
2005 MAY 16 PM 6:15
U.S. HOUSE OF REPRESENTATIVES
MC
(Office Use Only)

CHRISTOPHER SHAYS
(Full Name)
37 BEACON STREET
(Mailing Address)
BRIDGEPORT CT 06605
202/225-5541
Daytime Telephone

Filer Status	☒ Member of the U.S. House of Representatives	State CT District: 4	☐ Officer or Employee	Employing Office:
Report Type	☐ Annual (May 15)	☒ Amendment	☐ Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☒	No ☐
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☒	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Christopher Shays	5/16/05

4966

Name SHAYS

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT). In the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year

If you use a valuation method other than fair market value, please specify the method used.

If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E P, S, E
SP, DC, JT	Examples:	SP	Mega Corp. Stock				X								X										X								P
			Simon & Schuster		Indefinite																Royalties									X			
			1st Bank of Paducah, KY accounts					X									X									X							
JT	Wells Fargo Mortgage Escrow					X											X						X										
JT	Astoria Mortgage Escrow					X											X							X									
JT	Peoples Bank						X										X								X								
JT	Wright Patman FCU						X										X								X								
JT	Rec. Vehicle					X										X											X						P

For additional assets and unearned income, use next page.

HAND DELIVERED

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
2005 APR 19 AM 10: 33
U.S. HOUSE OF REPRESENTATIVES

HC

(Office Use Only)

BRADLEY J SHERMAN
(Full Name)

1030 Longworth House Office Building Washington, DC 20515
(Mailing Address)

202-225-5911
Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives — State: CA, District: 27	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☐ No ☑	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☐ No ☑	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts--	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Brad Sherman	Ap 17, '05

4968

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name BRADLEY J SHERMAN

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Dreyfus CA Intermediate Muni Bond Fund (See below for Address)	250,001-500,000	DIVIDENDS	5,001-15,000	PS
	Dreyfus CA Tax Exempt Bond (See below for Address)	100,001-250,000	DIVIDENDS	2,501-5,000	PS
	Dreyfus S&P Index Fund (Not IRA) - Dreyfus Fund, Box 9387, Providence, RI 29401	500,001-1,000,000	DIVIDENDS	5,001-15,000	PS
	BeeBee Draw/Hambert Combined Properties (Estimated Value)	50,001-100,000	ROYALTIES	5,001-15,000	
	Notes Payable by Friends of Brad Sherman - 555 South Flower St. #4501, Los Angeles, CA 90071, Attn: David Gould	$0	INTEREST	50,001-100,000	S

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name BRADLEY J SHERMAN

	Notes Payable by Sherman for Congress - 555 South Flower St. #4501, Los Angeles, CA 90071, Attn: David Gould	15,001-50,000	INTEREST	100,001-250,000	S
	Value of CPA Practice Equipment, including furniture	1-1,000	NONE	$0	
	Union Bank of California (Los Angeles, CA)	15,001-50,000	INTEREST	1-200	
	Bank of America (Santa Monica, CA)	100,001-250,000	INTEREST	201-1,000	
	Dreyfus Basic S&P Fund IRA (see p. 2 for address)	$0	DIVIDENDS	201-1,000	S
	CA State Legislators Retirement Pension from service on the CA Board of Equalization, valued on 6/30/04 (end of fiscal year), Sacramento, CA	100,001-250,000			
	Wescom Credit Union (Sherman Oaks, CA)	100,001-250,000	INTEREST	201-1,000	
	Vanguard TIPS Fund (IRA)	50,001-100,000	DIVIDENDS	201-1,000	P
	U.S. Savings Bonds	50,001-100,000	INTEREST	1,000-2,500	P

SCHEDULE IV - TRANSACTIONS

Name BRADLEY J SHERMAN

Report any purchase, sale or exchange by you, your spouse or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Dreyfus CA Intermediate Muni Bond Fund (See below for Address)	PS	9 transactions at various times through the year	$15,001-$50,000
	Dreyfus CA Tax Exempt Bond Fund (See below for Address)	PS	10 transactions at various times through the year.	$50,001-$100,000
	Dreyfus S&P Index Fund (Not IRA) - Dreyfus Fund, Box 9387, Providence, RI 29401	PS	5 transactions at various times through the year	$50,001-$100,000
	U.S. Savings Bonds	P	Various	$15,001-$50,000
	Vanguard TIPS Fund (IRS)	P	March 2004	$50,001-$100,000
	Dreyfus S&P Fund (IRA), See above for Address	S	March 2004	$50,001-$100,000
	*Note: Deposits and withdrawls from checking accounts at banks and credit unions, and payments received on promissory notes, are not listed above.			

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2005 MAY 20 AM 10:47
OFFICE OF THE CLERK
(Office Use Only)

9

MC

Don Sherwood
(Full Name)

41 Sherwood Ln
(Mailing Address)

Tunkhannock PA 18657

Daytime Telephone: 202 225 3731

Filer Status	☒ Member of the U.S. House of Representatives — State: ____ District: ____	☐ Officer or Employee	Employing Office: ____
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date: ____

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒	No ☐
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☒	No ☐
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Don Sherwood	5/18/05

4972

Name Don Sherwood | Page 1 of 3

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

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If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B												Block C							Block D											Block E
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify, For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	Examples: SP Mega Corp Stock					X								X										X								P
	Simon & Schuster		Indefinite																	Royalties									X			
	1st Bank of Paducah, KY accounts						X									X										X						
	SBI Management Inc	X														X				X1 Sale Proceeds									X			S
	Keystown Chrysler Jeep	X																		X1 Sale Proceeds									X			S
	Abington Chev	X												X		X				X1 Sale Proceeds									X			S
	Sherwood Chev								X						X	X				X1									X			
	Harlacher + Sherwood								X						X												X					
	D'Agata Sherwood Realty								X							X	X			Partnership										X		

For additional assets and unearned income, use next page.

Addition to page 1 of schedule III Don Sherwood

Dagata Sherwood Realty is a partnership of Ernest Dagata and Don Sherwood. It held

① Dealership Facility at
State St Clarks Summit Pa

② Dealership Facility at
Birney Ave Moosic Pa

#2 property was sold
on 1-20-04

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Don Sherwood

Page 2 of 3

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
	Sherwood Farms Ltd	E		None	
	Sherwood Groves Farm	C		None	
	General Dynamics	C	DIVIDENDS	III $201 – $1,000	
	Peoples Ltd	G	DIVIDENDS	VI $5,001 – $15,000	
	General Motors	E	DIVIDENDS	V $2,501 – $5,000	
	Corning	D		None	
	RCN	B		None	
	PPL Resources	D	DIVIDENDS	III $201 – $1,000	
	Emerson Electric	D	DIVIDENDS	IV $1,001 – $2,500	
	Merrill Lynch	D	DIVIDENDS; INTEREST	IV $1,001 – $2,500	
	E.D.S.	C	DIVIDENDS	II $1 – $200	
	Wachovia	H	DIVIDENDS	VII $15,001 – $50,000	
	Pepsico	B, C	DIVIDENDS	III $201 – $1,000	
	BP PLC	B, C	DIVIDENDS	III $201 – $1,000	
	Prudential Ins	B	DIVIDENDS; INTEREST	III $201 – $1,000	
	Comm Bank Corp	C	DIVIDENDS	III $201 – $1,000	
	Peoples Fin Services	C	DIVIDENDS	III $201 – $1,000	
	PNC Bank NA	D, I	DIVIDENDS; INTEREST	VI $5,001 – $15,000	
	Southern Union	D		None	
	Sherwood Gains Auto Group Inc	F	INTEREST	VI $5,001 – $15,000	P
	Rite Aid	C		None	
	Not self directed Red Point Partnership	G	DIVIDENDS; INTEREST	IV $1,001 – $2,500	P

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Don Sherwood

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
	Ford Motor Corp	C	DIVIDENDS	II	
	Grange Bank	E	DIVIDENDS	IV	
	Sherwood Freightliner Dover PA	H	Other Type of Income: K-1	IX	
	Progress Financial	A	DIVIDENDS	III	E
	Bio Key International	C		I	
	First Clearing LLC	G	DIVIDENDS	VI	P
	First Boston Financial	C	DIVIDENDS	II	E
	Wright Patman Credit Union	C	INTEREST	II	

This page may be copied if more space is required.

SCHEDULE IV — TRANSACTIONS

Name Don Sherwood

Page 1 of 1

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–04		X								
	SBI Managment Inc Moosic Pa		X		1-20-04					X					
	Keystone Chrysler Jeep Clarks Summit Pa		X		3-19-04					X					
	Abington Chevrolet Clarks Summit Pa		X		1-20-04					X					
	Sherwood Gouts Auto Group LLC Towanda Pa	X			6-22-04					X					
	Progress Financial Aquired by Fleet Boston			X	2-4-04	X									
	First Clearing LLC (Brokerage Acct)	X			Various					X					
	[Dagata Sherwood Realty Sold Property on Billerey Ave Moosic Pa]		X		1-20-04							X			
	Red Point Partners	X			6-30-04					X					

This page may be copied if more space is required.

Name Don Sherwood | Page 1 of 1

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Wachovia Bank	Line of Credit		X								
	Wachovia Bank	Mortgage 107 Mountain Dr Newark DE					X					

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

Name Don Sherwood | Page 1 of 1

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Dairy Farmers of America	Oct 20-21	Scranton Pa to Clovis NM Clovis To Kansas City Mo Kansas City to Scranton Pa	Y	Y	N	N

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Name	Page 1 of 1
T. Don Sherwood	

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
(1) President	Sherwood Chrs Inc
(2) President	Horlachert Sherwood
(3) Corp Sec	SBI Managment
(4) Corp Sec	Abington Chrs
(5) Corp Sec	Kingstown Chrysler
(6) V Pres	Sherwood Farm Ltd
(7) Director	Peoples Ltd
(8) Partner	D'Agata Sherwood Realty
(9) Partner	Sherwood Goors Farm
(10) Trustee	University of Scranton
(11) President	Sherwood Freightliner

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO, 2005 98-729 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A — For use by Members, officers, and employees

HAND DELIVERED

2005 MAY 16 AM 11:28

MC

(Office Use Only)

4981

John M. Shimkus
(Full Name)

504 Sumner Boulevard Collinsville, IL 62234
(Mailing Address)

202/225-5271
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives — State: IL, District: 19	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☑ No ☐	VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐ No ☑
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐ No ☑	IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐		**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		May 13, 2005

SCHEDULE I - EARNED INCOME

Name John M. Shimkus

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Holy Cross Lutheran Church, Collinsville, IL	Spouse Salary	$12,549.71

SCHEDULE II - PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

Name John M. Shimkus

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Associated General Contractors of America	Pitch to Baseball's Best Batters Competition	July 21, 2004	$100

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name John M. Shimkus

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	440 Spring Street, Collinsville, IL	$15,001 - $50,000	RENT	$5,001 - $15,000	
JT	690 9th Street SW, Washington, DC	$500,001 - $1,000,000	RENT	$15,001 - $50,000	
JT	American Century Growth Fund	$15,001 - $50,000	CAPITAL GAINS	$201 - $1,000	
DC	Lutheran Church Extension Fund	$1,001 - $15,000	INTEREST	$1 - $200	
JT	Perspective II Fixed and Variable Annuity	$50,001 - $100,000	DIVIDENDS	$1 - $200	
DC	Putnam Health Services Trust	$1,001 - $15,000	DIVIDENDS	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name John M. Shimkus

DC	Putnam Health Services Trust	$1,001 - $15,000	DIVIDENDS	$1 - $200	
DC	Putnam Health Services Trust	$1,001 - $15,000	DIVIDENDS	NONE	
JT	Putnam Voyage Fund CLSA	$15,001 - $50,000	CAPITAL GAINS	$1,001 - $2,500	
JT	Thrift Savings Plan	$50,001 - $100,000	CAPITAL GAINS	$1,001 - $2,500	
JT	Thirvent Market Fund	$15,001 - $50,000	DIVIDENDS	$1 - $200	

SCHEDULE V - LIABILITIES

Name John M. Shimkus

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
JT	National City Mortgage, Miamisburg, OH	Mortgage on 690 9th Street SW, Washington, DC	$250,001 - $500,000
JT	United Bank, Charleston, WVA	Mortgage on 690 9th Street, SW, Washington, DC	$50,001 - $100,000

NEW GIFT 1/23/2004	GIFT 2004 Calendar	FROM American Humane
NEW GIFT 1/23/2004	GIFT DVD: Muhammad: Legacy of a Prophet	FROM Astrolabe Pictures, Dr. Yakub A. Patel
NEW GIFT 1/23/2004	GIFT Coin	FROM Boy Scouts of America
NEW GIFT 1/23/2004	GIFT 2004 Calendar	FROM American Forest Resource Council
NEW GIFT 1/23/2004	GIFT Poster	FROM Riverbend Headstart & Family Services
NEW GIFT 1/27/2004	GIFT Miniature Wooden Shoes	FROM Teutopolis High School (Mascot: Wooden Shoes)
NEW GIFT 1/27/2004	GIFT Book: Being Human	FROM The President's Council on Bioethics
NEW GIFT	GIFT Book: Never Again?	FROM Anti-Defamation League

1/27/2004		
NEW GIFT 1/27/2004	GIFT Omaha Steaks & Cookbook	FROM Mr. George Ramons
NEW GIFT 1/29/2003	GIFT Book: Who's Who in U.S. Defense	FROM Defense News
NEW GIFT 1/29/2003	GIFT 2004 Desk Calendar	FROM Case New Holland
NEW GIFT 2/2/2004	GIFT Coffee Mug	FROM Michael Pasko, Junior Statesmen of America
NEW GIFT 2/2/2004	GIFT Video: The Forgetting, A Portrait of Alzheimer's	FROM PBS Home Video
NEW GIFT 2/4/2004	GIFT Plaque in shape of Illinois	FROM Tazewell County Republican Central Committee; Morton, IL
NEW GIFT 2/11/2004	GIFT Book: "Healthcare Understanding"	FROM Academy Health

NEW GIFT 2/12/2004	GIFT Book: "I Alone"	FROM Embassy of Spain, President Aznar
NEW GIFT 2/18/2004	GIFT Book: "America's God and Country"	FROM Beverly McDowell 5593 N Sugar Creek Rd Olney, IL 62450
NEW GIFT 2/18/2004	GIFT Baseball Cap & Coffee Mug	FROM Flora High School
NEW GIFT 2/19/2004	GIFT Clock	FROM Collinsville Chamber of Commerce
NEW GIFT 2/20/2004	GIFT 6 Boxes of Whole-Grain Dry Foods	FROM Paul Kirby, Hodgson Mills Effingham
NEW GIFT 2/20/2004	GIFT 4 Superman t-shirts	FROM Honeywell; Metropolis, IL
NEW GIFT 2/20/2004	GIFT Silk Flower Arrangement & Peuter Windchimes	FROM Saline County Republican Party; Harrisburg, IL
NEW	GIFT	FROM

GIFT 2/21/2004	Photo Album	Greene County Republican Party; Carrollton, IL
NEW GIFT 2/23/2004	GIFT Red, White, & Blue Elephant	FROM Marion Co. Republican Central Committee
NEW GIFT 2/25/2004	GIFT Book: The Ten Offenses	FROM Byron D. Williamson, President & CEO Integrity Publishers
NEW GIFT 2/25/2004	GIFT Golf Towel, Can Cozy, Cell Mate (for cell phone)	FROM Illinois E-911 Group
NEW GIFT 2/28/2004	GIFT 2 Boxes of Chocolates	FROM Doug Schnell, Taylorville
NEW GIFT 2/27/2004	GIFT Women's 2004 Daybook	FROM The Secretary of Health and Human Services
NEW GIFT 2/27/2004	GIFT "The Popcorn Man" Organizer	FROM The Popcorn Man, James L. Melikian, President
NEW GIFT 3/1/2004	GIFT Book: "Tunisia: A Journey Through a Country that Work	FROM Hanibal Club USA

NEW GIFT 3/1/2004	GIFT Pen & Pencil Set, Coffee Mug, Lapel Pin, Shovel from Gr	FROM Shawnee Community College
NEW GIFT 3/2/2004	GIFT Flashlight - -	FROM North Junior High in Collinsville
NEW GIFT 3/2/2004	GIFT Fish Oil Pills	FROM Dietary Supplement Information Bureau
NEW GIFT 3/3/2004	GIFT Book: "The World Leaders Speak: The Messiah Has Cc	FROM Washington Family Church
NEW GIFT 3/3/2004	GIFT Can Cozie & Pen	FROM Maytag
NEW GIFT 3/8/2004	GIFT 183rd Fighter Wing - 1 Picture, 1 shovel, 1 hard hat	FROM 183rd Fighter Wing
NEW GIFT 3/8/2004	GIFT CD: Ben Jelen "Come On"	FROM LifeTime TV "Stop the Violence Against Women Week"
NEW	GIFT	FROM

GIFT 3/9/2004	Map of Israeli Settlements in the West Bank	Peace Now
NEW GIFT 3/11/2004	GIFT Coal: "Fast Gas Relief"	FROM Massey Energy
NEW GIFT 3/11/2004	GIFT Book: Journal of Law, Technology, & Policy	FROM University of Illinois, School of Law
NEW GIFT 3/11/2004	GIFT Book: "A Guy's Gotta Eat"	FROM Russ Klettke, Author
NEW GIFT 3/11/2004	GIFT Book: "Absolutely American: Four Years at West Point"	FROM David Lipsky, Author
NEW GIFT 3/11/2004	GIFT CD: "Revelations House Hymns Chapter 1"	FROM Gospel Effect, South African Singing Group
NEW GIFT 3/12/2004	GIFT Kaskaskia College Jacket	FROM Staff of Kaskaskia College
NEW GIFT 3/12/2004	GIFT Kaskaskia Mug	FROM Administration at Kaskaskia College

NEW	GIFT	FROM
GIFT	Southwestern Illinois Electric Cooperative, Inc., keycha	Southwestern Illinois Electric Coop
3/12/2004		
NEW	GIFT	FROM
GIFT	Maglight Flashlight	Jones-Blythe Construction Co. of Springfield
3/12/2004		
NEW	GIFT	FROM
GIFT	Tote Bag	Salem
3/15/2004		
NEW	GIFT	FROM
GIFT	Cap	Enfield Fire Department
3/15/2004		
NEW	GIFT	FROM
GIFT	Book: Renewing the Soul of America	Save America
3/15/2004		
NEW	GIFT	FROM
GIFT	Bow Tie	Patti Simon
3/19/2004		
NEW	GIFT	FROM
GIFT	Replica of the Gateway Arch	8th LSO/89th RRC JAG ON-SITE in St. Louis
3/19/2004		

NEW GIFT 3/20/2004	GIFT Ball cap, t-shirt	FROM Illinois FSA
NEW GIFT 3/23/2004	GIFT Maytag Man Bobble-head	FROM Maytag
NEW GIFT 3/28/2004	GIFT Set of 4 drinking glasses	FROM State Representative Jim Watson
NEW GIFT 3/29/2004	GIFT Framed Topographical Map	FROM Post Oaks Flat RC&D in Dietrich presented by Mr. Roger
NEW GIFT 3/30/2004	GIFT T-shirt	FROM Hoops for Chartiy
NEW GIFT 3/31/2004	GIFT T-shirt	FROM
NEW GIFT 4/2/2004	GIFT T-shirt, Long-sleeve	FROM 2004 Credit Union Cherry Blossom Run
NEW GIFT	GIFT 2004 Hawaiian Calendar	FROM People Seeking Wisdom, Office of Hawaiian Affairs

4/5/2004		
NEW GIFT 4/6/2003	GIFT DVD: "The Light of the World"	FROM The Light of the World Project
NEW GIFT 4/8/2004	GIFT Coffee Mug	FROM United States Penitentiary in Marion
NEW GIFT 4/12/2004	GIFT Florida Quarter	FROM United States Mint
NEW GIFT 4/23/2004	GIFT Book: Defending a Higher Law	FROM The American Society for the Defense of Tradition, Family, and Prop
NEW GIFT 4/23/2004	GIFT Book: Eco-imperialism	FROM Paul Driessen
NEW GIFT 4/23/2004	GIFT Book: The Believer's Conditional Security	FROM Evangelical Outreach, Washington, PA
NEW GIFT 4/23/2004	GIFT CD: Operation Homecoming	FROM National Endowment for the Arts

NEW	GIFT	FROM
GIFT	Book: United States Senate Catalogue of Fine Arts	William Kloss & Diane K. Skvarla
4/26/2004		
NEW	GIFT	FROM
GIFT	Book: A Legislative History of the Taiwan Relations Act	Taiwan Economic and Cultural Representative Office in the United S
4/28/2004		
NEW	GIFT	FROM
GIFT	4 Toy UPS Delivery Trucks	UPS
4/28/2004		
NEW	GIFT	FROM
GIFT	Book: Renewing the Atlantic Partnership	Council on Foreign Relations
4/29/2004		
NEW	GIFT	FROM
GIFT	Pocket Knife	Jefferson County Republican Central Committee
5/3/2004		
NEW	GIFT	FROM
GIFT	Book: The United States and UN Peacekeeping	Richard S. Williamson
5/3/2004		
NEW	GIFT	FROM
GIFT	Poster on Education	The Trust for Early Education
5/3/2004		
New	Mug, pencils, magnet, button, and bookmark	From

Gift 5/4/2004		Illinois Libraries
NEW GIFT 5/11/2004	GIFT Book: Science and Engineering Indicators 2004 Vol. 1	FROM National Science Board
NEW GIFT 5/11/2004	GIFT Book: Free Culture	FROM Consumer Electronics Association
NEW GIFT 5/12/2004	GIFT Calcium Vitamins	FROM Dietary Supplement Information Bureau
NEW GIFT 5/12/2004	GIFT Book: Abraham: A Journey to the Heart of Three Faiths	FROM Harper Collins Publishing
NEW GIFT 5/13/2004	GIFT Hardback Book: Your Money or Your Life	FROM Pfizer, Inc.
NEW GIFT 5/13/2004	GIFT Video: Pro-Life Legislatures' Conference	FROM National Association for the Advancement of Preborn Children
NEW GIFT 5/13/2004	GIFT Book: The Financial Services Fact Book 2004	FROM The Financial Services Roundtable

NEW GIFT 5/13/2004	GIFT Book: Thomas Jefferson: Light and Liberty	FROM Eric S. Peterson, Editor
NEW GIFT 5/14/2004	GIFT Poster: Breast Cancer 5K Run	FROM Susan G. Komen Breast Cancer Foundation
NEW GIFT 5/18/2004	GIFT Book: Modern Day Heroes	FROM Co-Authors
NEW GIFT 5/18/2004	GIFT Framed Reprint of Stamps of the Lewis and Clark Bicent	FROM United States Postal Service
NEW GIFT 5/21/2004	GIFT Hard Hat	FROM Midwest Generation
NEW GIFT 5/21/2004	GIFT Book: A Shelter Is Not A Home...Or Is It?	FROM Institute for Children & Poverty
NEW GIFT 5/21/2004	GIFT Book: Breaking the Culture Trance	FROM Fetzer Institute

NEW GIFT 5/21/2004	GIFT Book: Labor Pains	FROM Saint Anthony's Health Center
NEW GIFT 5/21/2004	GIFT Book: The Merck Manual of Health & Aging	FROM Merck
NEW GIFT 5/24/2004	GIFT USDA hat	FROM AFGE
NEW GIFT 6/1/2004	GIFT Book: Fighting for Public Justice	FROM Association of Trial Lawyers of America
NEW GIFT 6/1/2004	GIFT Coin	FROM Ambassador of the Republic of Lithuania
NEW GIFT 6/1/2004	GIFT Book: Bilnius Baroque, Jan Buthak	FROM Ambassador of the Republic of Lithuania
NEW GIFT 6/2/2004	GIFT Umbrella	FROM Ambassador of Lithuania
NEW GIFT	GIFT CD: Tribute to a Generation	FROM Smithsonian Institute

6/3/2004		
NEW	GIFT	FROM
GIFT	Bible	H.O.P.E Ministries, International
6/4/2004		
NEW	GIFT	FROM
GIFT	CRFC VideoTeleconference to Tallimm, Estonia	Constitutional Rights Foundation of Chicago
6/4/2004		
NEW	GIFT	FROM
GIFT	Book: "A Just War, or Just A War?: Iraq a Year Later"	Chapman University School of Law
6/7/2004		
NEW	GIFT	FROM
GIFT	Book: Humanitarian Aid for a Democratic Transistion in (	Institute for Cuban & Cuban-American Studies, University of Miami
6/7/2004		
NEW	GIFT	FROM
GIFT	CD: Sumary of Research U of I College of Engineering	David E. Daniel, Dean of the College of Engineering University of Illir
6/8/2004		
NEW	GIFT	FROM
GIFT	Book: Patriots Vote For Guaranteed Medical & Full Salai	Jimmie R. Johnston, Author
6/8/2004		
NEW	GIFT	FROM
GIFT	2004 National LCMS Youth Gathering Holy Bible	Lutheran Church Missouri Synod
6/8/2004		

NEW GIFT 6/9/2004	GIFT Book: Finding Common Grounds for Peace & Justice in	FROM Association of Humanitarian LawyersKashmiri American Council
NEW GIFT 6/10/2004	GIFT Book: The End of Oil	FROM Houghtan Mifflin Company
NEW GIFT 6/14/2004	GIFT Calandar	FROM United States Capitol Historical Society
NEW GIFT 6/14/2004	GIFT Book: Lectures on Roman History	FROM Anne Paolucci, President, Council on National Literatures
NEW GIFT 6/16/2004	GIFT Book: Lithuania 700 Years	FROM Peter D. Ford, Professional Staff for Select Committee on Homeland
NEW GIFT 6/16/2004	GIFT Book: Partners in Prosperity	FROM Daimler Chrysler
NEW GIFT 6/16/2004	GIFT Book: Created Equal	FROM Fetzer Institute
NEW	GIFT	FROM

GIFT 6/16/2004	Lapel Ribbon	National Center for Missing & Exploited Children
NEW GIFT 6/16/2004	GIFT Big River: Summer Guide from the Twin Cities to the Qu	FROM Friends of the Upper Mississippi River Refuges
NEW GIFT 6/18/2004	GIFT Book: The Party's Over: Oil, War and the Fate of Indust	FROM New Society Publishers
NEW GIFT 6/21/2004	GIFT DVD: D-Day: Down to Earth, Return of the 507th	FROM Producers: Phil Walker and David Druckenmiller
NEW GIFT 6/22/2004	GIFT Book: "Transforming For Stabilization and Reconstructio	FROM Authors: Hans Binnendijk and Stuart E. Johnson
NEW GIFT 6/22/2004	GIFT Book: "Risk Revolution"	FROM Author: Derek V. Smith, CEO, Choicepoint, Inc.
NEW GIFT 6/22/2004	GIFT Book: "HIV/AIDS The Faith Community Responds"	FROM John J. DeGioia, President, Georgetown University
NEW GIFT 6/22/2004	GIFT Peace Pipe	FROM Mirlinda Sada, Hope Fellow, Kosovo

NEW GIFT 6/26/2004	GIFT Book: Confronting Jihad: Israel's Struggle & The World	FROM The American Israel Public Affairs Committee, Nina Rosenwald, exe
NEW GIFT 6/26/2004	GIFT Framed Certificate of Appreciation	FROM Illinois Rural Letter Carriers Association
NEW GIFT 6/28/2004	GIFT Book: Plan B: Rescuing a Planet Under Stress and Civil	FROM Rep. John Lewis
NEW GIFT 6/29/2004	GIFT Book: A Brief History of Political Thought and Statecraft	FROM Ronald Docksai, President, The Walter Bagehot Research Council o
NEW GIFT 6/30/2004	GIFT Paper Weight: Lewis & Clark	FROM Department of the Interior
NEW GIFT 6/30/2004	GIFT Baseball	FROM Association of Financial Guaranty Insurers
NEW GIFT 6/30/2004	GIFT Book: The Case for Israel	FROM American Israel Public Affairs Committee

NEW GIFT 7/1/2004	GIFT ATS Teddy Bear	FROM Automotive Technology Systems, LLC
NEW GIFT 7/9/2004	GIFT Book: Lasting Friendship, Enduring Goodwill	FROM Taipei Economic and Cultural Representative Office in the United St
NEW GIFT 7/12/2004	GIFT Groundbreaking Shovel from the new Applied Science ce	FROM Rend Lake College
NEW GIFT 7/12/2004	GIFT Video: I Can't Marry You	FROM Catherine Gray, Producer/Director
NEW GIFT 7/13/2004	GIFT 12 Peaches	FROM South Carolina Farm Bureau and South Carolina Peach Council
NEW GIFT 7/15/2004	GIFT Book: Marriage Under Fire	FROM Dr. James Dobson, Author
NEW GIFT 7/16/2004	GIFT Book: The Viking Discovery of America	FROM Knut Vollebaek, Ambassador or Norway
NEW GIFT	GIFT Book: Sex, Lies & Politics	FROM Larry Flynt, Author

7/16/2004		
NEW GIFT	GIFT Book: We The People: The Citizens and The Constitutic	FROM Center for Civic Education
7/19/2004		
NEW GIFT	GIFT Flowers, stawberries, tomatoe, bagel, crushed almonds	FROM Crop Protection Coalition
7/20/2004		
NEW GIFT	GIFT Elephant Statue (worth about $25.00)	FROM H. Jane Grieve Bouril
7/23/2004		
NEW GIFT	GIFT DVD: OutFOXed: Rupert Murdoch's War on Journalism	FROM Center for American Progress
7/23/2004		
NEW GIFT	GIFT 2 crates of Shawnee Sweetcorn	FROM Steve Scaites, Campground Owner's Association
8/2/2004		
NEW GIFT	GIFT Book: Hoover Digest Research and Opinion on Public P	FROM Hoover Institution on War, Revolution, and Peace; Stanford Universit
8/6/2004		
NEW GIFT	GIFT Book: The Hungry American	FROM Tom McDevitt, Author
8/9/2004		

NEW GIFT 8/10/2004	GIFT Pictures framed, JMS in Speaker's Chair	FROM National Railroad Hall of Fame
NEW GIFT 8/11/2004	GIFT Book: Polling Matters	FROM The Gallup Poll
NEW GIFT 8/13/2004	GIFT Book: The Fate of the World: 101 Reasons to Vote for (	FROM Ron White, Author
NEW GIFT 8/13/2004	GIFT Mini maglite & Can Cooler	FROM Officer Kevin C. Jans, Chicago Police Department
NEW GIFT 8/13/2004	GIFT SIUE shirt, pin, and paperweight	FROM Chancellor Vandergrift of SIU-E
NEW AWARD 8/16/2004	AWARD Wooden Illinois Plaque for Support and Restoration to th	FROM Michael Kuhn, President, Lower Kaskaskia Stakeholders, Inc.
NEW GIFT 8/16/2004	GIFT Thermometer	FROM Dick Deibel, 804 N. Glenwood, Effingham
NEW	GIFT	FROM

GIFT 8/17/2004	Hat	Pork Producers
NEW GIFT 8/18/2004	GIFT Hat	FROM RFD Radio Network
NEW GIFT 8/18/2004	GIFT Hat	FROM Department of Commerce and Economic Opportunity
NEW GIFT 8/20/2004	GIFT Garment Bag for the RNC Convention	FROM Verizon
NEW GIFT 8/22/2004	GIFT Dozen Ears of Corn and 4 Tomatoes	FROM Bob Keller, Collinsville
NEW GIFT 2/23/2004	GIFT Book: The United States and The Holy See: The Long F	FROM R. James Nicholson, Ambassodor of the United States of America to
NEW GIFT 2/25/2004	GIFT AAA Guide to New York	FROM Congressman John L. Mica
NEW GIFT 2/25/2004	GIFT Book: Social Security and Its Discounts	FROM Cato Institute

NEW GIFT 8/26/2004	GIFT Hardhat	FROM Project 29 in Taylorville (ribbon cutting ceremony)
NEW GIFT 8/26/2004	GIFT Book: Painful Questions: An Analysis of the September	FROM James W. Walter Jr., Walden Three Inc.
NEW GIFT 8/30/2004	GIFT Video: Africa Extreme	FROM Rep. E. Clay Shaw, Jr.
NEW GIFT 8/30/2004	GIFT Pocket Calendar	FROM Myron (business gifts)
NEW GIFT 9/1/2004	GIFT Book: AFFI's Weekly Frozen Meal Plan	FROM American Frozen Food Institute
NEW GIFT 9/1/2004	GIFT Lewis & Clark Nickel	FROM U.S. Department of the Treasury
NEW GIFT 9/1/2004	GIFT Book: Eco-Imperialism: Green Power, Black Death	FROM Massey Energy Company

NEW GIFT 9/2/2004	GIFT Book: Uncommon Courage	FROM Altria
NEW GIFT 9/7/2004	GIFT "The Pocket Prayer"	FROM Thomas J. Albrecht, President, The Pocket Prayer Co. Naperville, IL
NEW GIFT 9/8/2004	GIFT 4 Passes to the Great Godfrey Maze	FROM Godfrey Parks and Recreation Department
NEW GIFT 9/8/2004	GIFT Book: A Handbook on Obesity in America	FROM Rep. Carolyn McCarthy (NY-4)
NEW GIFT 9/9/2004	GIFT Paperweight: 2004 Republican Convention	FROM The New York Stock Exchange
NEW GIFT 9/14/2004	GIFT Plate: Vilnius, Lithuania	FROM Lithuanian Journalists
NEW GIFT 9/16/2004	GIFT Book: The First 600 Days of Combat	FROM The U.S. Air Force
NEW GIFT	GIFT Declaration of Independence in Spanish	FROM CATO Institute

9/16/2004		
NEW GIFT 9/17/2004	GIFT Book: Miracle Cure	FROM Pacific Research Institute
NEW GIFT 9/22/2004	GIFT Book: Where the People Speak	FROM United States Capitol Historical Society
NEW GIFT 9/23/2004	GIFT Book: Iran: Time for a New Approach	FROM Council on Foreign Relations
NEW GIFT 9/24/2004	GIFT Book: Global Chicago	FROM The Chicago Council on Foreign Relations
NEW GIFT 9/24/2004	GIFT Book: Health Affairs: Child Health, A Progress Report	FROM Nemours
NEW GIFT 9/29/2004	GIFT Pedometer	FROM HealthCare Dimensions
NEW GIFT 9/30/2004	GIFT Paperweight: Operation Iraqi Freedom	FROM Col. Kevin Williams EN

NEW GIFT 10/1/2004	GIFT DVD: FahrenHYPE 9/11	FROM Capitol Strategies, LLC
NEW GIFT 10/4/2004	GIFT Pen	FROM APCO International
NEW GIFT 10/5/2004	GIFT Book: A Tribute to Military Families...Letters of Thanks f	FROM Alan J. Lacy, Chairman and CEO Sears, Roebuck and Co. & Candac
NEW GIFT 10/5/2004	GIFT Book: Leaving No Child Left Behind?	FROM Frederick M. Hess and Chester E. Finn, Jr.
NEW GIFT 10/7/2004	GIFT T-Shirt: NCYLC	FROM NCYLC (National Congressional Youth Leadership Council
NEW GIFT 10/8/2004	GIFT Book: The Missing Peace: The Inside Story of the Fight	FROM American Israel Public Affairs Committee
NEW GIFT 10/8/2004	GIFT Beanie Baby: Bear "I Love Illinois"	FROM The Bell Family from Bloomington
NEW	GIFT	FROM

GIFT 10/13/2004	3 Operation Iraqi Freedom Coins	
NEW GIFT 10/15/2004	GIFT Print from the Taiwan Villiage at the May 2004 Centennia	FROM Friends of Taiwan-Greater St. Louis
NEW GIFT 10/18/2004	GIFT Book: Courting Disaster by Pat Robertson	FROM Byron D. Williamson, President & CEO, Integrity Publishers
NEW GIFT 10/22/2004	GIFT Book: Unfit Cammander	FROM Texans for Truth
NEW GIFT 10/25/2004	GIFT DVD(four copies): The Great UN Gun Debate	FROM NRA
NEW GIFT 10/25/2004	GIFT Calendar, United We Stand	FROM The Retired Enlisted Association
NEW GIFT 10/26/2004	GIFT Book: The Grace and Power of Civility	FROM Fetzer Institute
NEW GIFT 10/27/2004	GIFT Book: Guns, Bush, & Kerry	FROM Wayne R. LaPierre, Exec. VP, NRA

NEW GIFT 10/27/2004	GIFT "America" Paperweight	FROM Rend Lake College
NEW GIFT 10/27/2004	GIFT 2005 American Legion Pin	FROM American Legion
NEW GIFT 10/27/2004	GIFT Coffee Cups	FROM Villiage of Glen Carbon
NEW GIFT 11/1/2004	GIFT Paperweight, Pin, Cert. Of Appreciation	FROM American Legion & The Citizens Flag Alliance, Inc.
NEW GIFT 11/3/2004	GIFT 2 DVDs: The Science and Politics of Vaccine-Induced A	FROM Dr. Steve Jackman, Springfield
NEW GIFT 11/3/2004	GIFT Calendar: National Marine Sanctuaries	FROM National Marine Sanctuaries
NEW GIFT 11/3/2004	GIFT Wisconsin Quarter Information Kit	FROM Department of the Treasury, United States Mint

NEW GIFT 11/4/2004	GIFT DVD: War on Terrorism	FROM Navy/Marine Corps
NEW GIFT 11/9/2004	GIFT Baseball Cap & Shirt	FROM Boilermakers Union Local 363, Belleville
NEW GIFT 11/9/2004	GIFT Book: Voices of War	FROM Library of Congress
NEW GIFT 11/9/2004	GIFT Pedometer	FROM American Physical Therapy Association
NEW GIFT 11/10/2004	GIFT 2005 Calendar	FROM The National Arbor Day Foundation
NEW GIFT 11/10/2004	GIFT 2005 Calendar	FROM Illinois Historic Preservation Agency
NEW GIFT 11/17/2004	GIFT Book: GASP!	FROM Shoemaker & Hoard, Publishers
NEW GIFT	GIFT Hard Hat	FROM Capitol Retirement Villiage

11/18/2004

NEW GIFT 11/18/2004	GIFT Book: Do What Works	FROM Ascent Education Press
NEW GIFT 11/19/2004	GIFT Crystal Stein	FROM Italian NATO Parliamentary Assembly Delegation
NEW GIFT 11/22/2004	GIFT Pocket Calendar	FROM Retired and Senior Volunteer Program of Sangamon, Menard, and L
NEW GIFT 11/29/2004	GIFT 2004 Presidential Election One Dollar Bill	FROM Doug Schnell, Taylorville, IL
NEW GIFT 11/30/2004	GIFT Book: Pay to the Order of Puerto Rico	FROM Alex Odishelidze, Author
NEW GIFT 11/30/2004	GIFT Book: Commonsense on Weapons of Mass Destruction	FROM Ambassador Thomas Graham Jr
NEW GIFT 11/30/2004	GIFT Book: United States Official Records on the Armenian G	FROM US Congressional Caucus on Armenian Issues

NEW GIFT 12/1/2004	GIFT Country Bob's Cookbook	FROM Terry Edson, Country Bob's in Centralia
NEW GIFT 12/1/2004	GIFT 2005 Chinese Calandar & Commemerative Plaque	FROM The Chinese People's Association for Friendship With Foreign Coun
NEW GIFT 12/1/2004	GIFT Book: 2004 Restaurant Neighbor Awar	FROM National Restaurant Association
NEW GIFT 12/6/2004	GIFT 2005 Calandar	FROM Ministry of Foreign of Foreign Affairs of Japan
NEW GIFT 12/7/2004	GIFT 2005 Calandar w/ Military Pictures	FROM CELEBRATIONS 2005, Hinsdale, IL
NEW GIFT 12/7/2004	GIFT CD: Light One Candle	FROM US Air Force
NEW GIFT 12/13/2004	GIFT Box of Russell Stover Chocolates	FROM John Passiglia, Secretary-Treasurer, Boilermakers Union Local 363
NEW	GIFT	FROM

GIFT 12/13/2004	Gift Basket from Cracker Barrel	Queda Headlee, Flora, IL
NEW GIFT 12/14/2004	GIFT 2 Calendars	FROM Small Business Development Center, Shawnee Community College
NEW GIFT 12/14/2004	GIFT T-shirt, Stamp, Bumper Stickers, Pen	FROM Air National Guard
NEW GIFT 12/14/2004	GIFT Box of Chocolates	FROM Congressional Youth Leadership Council
NEW GIFT 12/14/2004	GIFT Book: The Case For Democracy	FROM Steve Hefter
NEW GIFT 12/15/2004	GIFT Calendar	FROM Consulate General of Japan
NEW GIFT 12/15/2004	GIFT Book: Road to Purpose	FROM Ken Behring & Wheelchair Foundation
NEW GIFT 12/15/2004	GIFT Brandy & Coffee Mug	FROM Ambassador of Lithuania

NEW GIFT 12/15/2004	GIFT DVD: Black Sky	FROM Discovery Channel
NEW GIFT 12/16/2004	GIFT Used Basketball	FROM Bobby Bone, Collinsville High School Athletic Department
NEW GIFT 12/16/2004	GIFT Calendar	FROM Ducks Unlimited
NEW GIFT 12/17/2004	GIFT Book: Wahabi Islam	FROM Saudi Arabian Ambassador
NEW GIFT 12/17/2004	GIFT Book: The Life of Olaudah Equiano	FROM Lucie F. Naphin, VP Gov. Relations, RR Donnelley
NEW GIFT 12/17/2004	GIFT Calendar	FROM American Wind Energy Association
NEW GIFT 12/20/2004	GIFT 1lb. Box of Whitman's Chocolates	FROM Doug Schnell, Taylorville

NEW GIFT 12/20/2004	GIFT Christmas Card and Christmas CD	FROM Save-a-Life Foundation, Southeastern Illinois College
NEW GIFT 12/21/2004	GIFT USO T-shirt	FROM James S. McDonnell USO at Lambert
NEW GIFT 12/21/2004	GIFT CD: Christmas Music	FROM Southeastern Illinois College
NEW GIFT 12/21/2004	GIFT CD: Rolling Stones, Live Licks	FROM EMI
NEW GIFT 12/22/2004	GIFT Book: News in the Public Interest	FROM Louisiana State University
NEW GIFT 12/22/2004	GIFT Ruler/Magnifying Glass	FROM Kay Bailey Hutchison for Senate Committee
NEW GIFT 12/23/2004	GIFT United States Historical Society Collector's Christmas Or	FROM Michele E. Lieber, General Motors Corp.
NEW GIFT	GIFT Bag of Chocolate Truffles	FROM Carma Froemling, Glen Carbon

12/23/2004		
NEW GIFT 12/30/2004	GIFT 2005 Reagan Ranch Calendar	FROM Young America's Foundation
NEW GIFT 12/30/2004	GIFT Patriotic Bookmark	FROM St. Thomas Aquinas Center, West Lafayette, IN
NEW GIFT 12/30/2004	GIFT Coffee	FROM Freedom to Travel (Cuba)
NEW GIFT 12/30/2004	GIFT Calendar	FROM American Forest Resource Council
NEW GIFT 12/30/2004	GIFT Train Calendar	FROM BNSF
NEW GIFT 12/30/2004	GIFT Calendar	FROM National American Indian Museum
NEW GIFT 12/30/2004	GIFT Calendar	FROM Stand Up for Rural America

HAND DELIVERED

ACTIVE RESOURCE CENTER

2005 MAY 16 AM 9:45

MC

5021

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A For use by Members, officers, and employees

William Franklin Shuster
(Full Name)

9 Overlook Drive Hollidaysburg, PA 16648
(Mailing Address)

202-225-2431
Daytime Telephone:

(Office Use Only)

Filer Status	☑ Member of the U.S. House of Representatives	State: PA District: 09	☐ Officer Or Employee — Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☐ No ☑	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions-	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Bill Shuster	5-13-05

SCHEDULE I - EARNED INCOME

Name William Franklin Shuster

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Thomas Holding(spouse)	Advertising consulting fee	$7,898

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name William Franklin Shuster

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	5 S LLC-General Partner of Shuster Family Limited Partnership	$1,001 - $15,000	RENT and Interest Income	$1 - $200	
DC	American Washington Mutual Investors Fund A	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Blairmont Club LLC	$1 - $1,000	Other: PARTNERSHIP	$201 - $1,000	
DC	CBF Aggressive Growth Emp Port 1990-1992 Alt Cx	$1,001 - $15,000	DIVIDENDS	NONE	
DC	CBF Aggressive Growth Emp Port 1987-1989 Alt Cx	$1,001 - $15,000	DIVIDENDS	NONE	
	Congressional Federal Credit Union	$1 - $1,000	DIVIDENDS	$1 - $200	

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SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name William Franklin Shuster

DC	M & T Bank Certificate of Deposit	$1,001 - $15,000	INTEREST	$1 - $200	
DC	M & T Bank Certificates of Deposit	$1,001 - $15,000	INTEREST	$1 - $200	
DC	M & T Bank Certificates of Deposits	$1,001 - $15,000	INTEREST	$1 - $200	
JT	M & T Bank Market Advantage Account	$1,001 - $15,000	INTEREST	$201 - $1,000	
JT	M & T Bank Money Market Index Account	$15,001 - $50,000	INTEREST	$201 - $1,000	
DC	M & T Bank Savings	$1,001 - $15,000	INTEREST	$1 - $200	
DC	M & T Bank Savings	$1,001 - $15,000	INTEREST	$1 - $200	
JT	M &T Bank Checking	$1,001 - $15,000	INTEREST	$1 - $200	
DC	Oppenheimer Convertible Securities Fund	$1 - $1,000	DIVIDENDS	$1 - $200	
DC	Oppenheimer Quest Opportunity Value Fund A & B	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Putnam Fund for Growth & Income	None	DIVIDENDS	$1 - $200	S
DC	Rite Aid Corporation	$1,001 - $15,000	DIVIDENDS	NONE	
DC	Rite Aid Corporation	$1,001 - $15,000	DIVIDENDS	NONE	
	S2 & L2 Partnership East Freedom, PA.	$250,001 - $500,000	RENT	$50,001 - $100,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name William Franklin Shuster

	SEI Core Fixed Income Fund	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	P
	SEI Emerging Markets Debt Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	PS
	SEI Emerging Markets Equity Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	PS
	SEI High Yield Bond Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	SEI International Equity Fund	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	P
	SEI International Fixed Income Fund	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	PS
	SEI Large Cap Growth Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	SEI Large Cap Value Fund	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	PS
	SEI PA Municipal Bond Fund	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	P
	SEI Prime Obligation Fund	$1 - $1,000	DIVIDENDS	$1 - $200	PS
	SEI Small Cap Growth Fund	$1,001 - $15,000	DIVIDENDS	NONE	P
	SEI Small Cap Value Fund	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	P
	SEI Tax Free Fund	$1 - $1,000	DIVIDENDS	$1 - $200	P
	SEI Tax Managed Large Cap	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name William Franklin Shuster

	SEI Tax Managed Small Cap	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	Shuster Family Limited Partnership Fomerly Shuster Rentals	$100,001 - $250,000	RENT and Interest Income	$201 - $1,000	
	UBS Cash Fund Formerly Painewebber	$1,001 - $15,000	DIVIDENDS	$1 - $200	

SCHEDULE IV - TRANSACTIONS

Name William Franklin Shuster

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	SEI PRIME OBLIGATION FUND	S	07-12-04	$1,001 - $15,000
SP	SEI PRIME OBLIGATION FUND	P	13 TIMES	$1,001 - $15,000
	PUTNAM FUND FOR GROWTH AND INCOME	S	04-12-04	$1,001 - $15,000

SCHEDULE V - LIABILITIES

Name William Franklin Shuster

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
JT	BANK OF AMERICA VISA	REVOLVING CHARGE CARD	$15,001 - $50,000

HAND DELIVERED

BILL SHUSTER
9TH DISTRICT, PENNSYLVANIA

ASSISTANT MAJORITY WHIP

COMMITTEE ON TRANSPORTATION AND INFRASTRUCTURE
SUBCOMMITTEES
CHAIRMAN
ECONOMIC DEVELOPMENT, PUBLIC BUILDINGS AND EMERGENCY MANAGEMENT
HIGHWAYS, TRANSIT AND PIPELINES
WATER RESOURCES AND ENVIRONMENT

Congress of the United States
House of Representatives
Washington, DC 20515–3809

COMMITTEE ON ARMED SERVICES
SUBCOMMITTEES:
TACTICAL AIR AND LAND FORCES
TERRORISM, UNCONVENTIONAL THREATS AND CAPABILITIES
COMMITTEE ON SMALL BUSINESS
SUBCOMMITTEE
WORKFORCE, EMPOWERMENT AND GOVERNMENT PROGRAMS
CONGRESSIONAL RURAL CAUCUS
RURAL HEALTH CARE COALITION
CONGRESSIONAL SPORTSMEN'S CAUCUS

June 15, 2005

me

LEGISLATIVE RESOURCE CENTER
2005 JUN 15 PM 4:18
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

The Clerk, U.S. House of Representatives
Legislative Resource Center
B106 Cannon House Office Building
Washington, DC 20515–6612

RE: William Franklin Shuster
2004 Financial Disclosure Statement

To Whom It May Concern:

Please be advised of the following additions to or corrections of information provided in the above mentioned report:

1. The interest in the Shuster Family Limited Partnership is comprised of a 19.8% in the following assets:
   a. Cash in Checking and Savings — $26,155
   b. Amounts due from rental agent — $ 9,834
   c. Family farm and rental residence located at 825 Ritchey Road, Everett, PA (approx. 100 acres) — $500,000–$1,000,000

2. 5S LLC is the general partner in the Shuster Family Limited Partnership of which 20% is owned by William F. Shuster.
   a. 20% of 1% = .2% interest in Shuster Family Partnership — $1,000–$15,000

1108 LONGWORTH HOUSE OFFICE BUILDING
WASHINGTON, DC 20515–3809
(202) 225–2431
FAX: (202) 225–2486

310 PENN STREET
HOLLIDAYSBURG, PA 16648
(800) 854–3025
(814) 696–6318
FAX: (814) 696–6726

647 PHILADELPHIA STREET
SUITE 303
INDIANA, PA 15701
(724) 463–0516
FAX: (724) 463–0618

118 WEST MAIN STREET
SUITE 302
SOMERSET, PA 15501
(814) 443–3918
FAX: (814) 443–6373

179 EAST QUEEN STREET
CHAMBERSBURG, PA 17201
(717) 264–8308
FAX: (717) 264–0269

3. S^2 L^2 Partnership ownership represents a 60% interest in the following assets and liabilities:

a.	Cash	$36,198
b.	Commercial real estate RD 1 Box 316D East Freedom, PA 16637 (rented to Thomas Holding Co for auto dealership)	$1,300,000– $1,500,000
c.	Mortgage and other debts	$831,271

1. In Schedule III the following assets should not have had "Block E" designations of either "S" or "P" as cumulative sales or purchases did not exceed $1,000 for these items:

SEI Core Fixed Income Fund
SEI Emerging Markets Debt Fund
SEI Emerging Markets Equity Fund
SEI High Yield Bond Fund
SEI International Equity Fund
SEI International Fixed Income Fund
SEI Large Cap Growth Fund
SEI Large Cap Value Fund
SEI PA Municipal Bond Fund
SEI Small Cap Growth Fund
SEI Small Cap Value Fund
SEI Tax Free Fund
SEI Tax Managed Large Cap
SEI Tax Managed Small Cap

If there is any further information that is required please do not hesitate to contact me.

Sincerely,

Bill Shuster

Bill Shuster

Member of Congress

WFS/slf

HAND DELIVERED

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A For use by Members, officers, and employees

Robert R. "Rob" Simmons
(Full Name)

268 North Main Street Stonington, CT 06378
(Mailing Address)

202-225-2076
Daytime Telephone:

2005 MAY 16 PM 5:00
(Office Use Only)

HC

Filer Status: ☑ Member of the U.S. House of Representatives — State: CT — District: 02 ☐ Officer Or Employee — Employing Office:

Report Type: ☑ Annual (May 15) ☐ Amendment ☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	R R Simmons	MAY 16 2005

5031

SCHEDULE I - EARNED INCOME

Name Robert R. "Rob" Simmons

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Learn Regional Multicultural Magnet School	Spouse Salary	$35,325
Dodson Boat Yard, Stonington, CT	DC Salary	$3,935
Connecticut State Retirement Division	Retirement	$4,220
Defense Finance and Retirement Accounting Service	Retirement	$17,970

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Robert R. "Rob" Simmons

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	20th Century Growth Fund	$100,001 - $250,000	Other: IRA	$2,501 - $5,000	
DC	Acuity Brands (formerly National Services Industries)	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	American Home Products	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	S
DC	Apache Corp	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
SP	Apache Corp	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
DC	Australian Government Bonds	$1,001 - $15,000	INTEREST	$201 - $1,000	PS

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Robert R. "Rob" Simmons

SP	Australian Government Bonds	$15,001 - $50,000	INTEREST	$1,001 - $2,500	PS
SP	Black Rock Funds	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	
DC	Blackrock Funds	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
DC	Blackrock Money Market Fund	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
SP	Cathay General	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P
DC	Cathay General BankCorp	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
SP	Cathay General BankCorp	$15,001 - $50,000	INTEREST	$1,001 - $2,500	P
SP	Century Telephone	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	
DC	Century Telephone	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
JT	Charter One Bank	$1,001 - $15,000	INTEREST	$1 - $200	
DC	Chevron Texaco	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	Chevron Texaco	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
DC	Cintas Corp	$15,001 - $50,000	DIVIDENDS	$1 - $200	
SP	Coca Cola	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Robert R. "Rob" Simmons

SP	CT Bonds	$15,001 - $50,000	INTEREST	$201 - $1,000	
DC	Dodge & Cox Stock Fund	$50,001 - $100,000	DIVIDENDS/INTEREST/CAPITAL GAINS	$1,001 - $2,500	
DC	Duke Energy	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	Duke Energy	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
DC	Duke Realty	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	Duke Realty	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
DC	Dupont	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	Dupont	$100,001 - $250,000	DIVIDENDS	$15,001 - $50,000	
DC	Electronic Arts	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
SP	Electronic Arts	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
SP	Ellington, Conn Bond	$15,001 - $50,000	INTEREST	$201 - $1,000	P
SP	Emerson Electric	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	
DC	Exxon Mobil	$1,001 - $15,000	DIVIDENDS	$1,001 - $2,500	P
SP	Exxon Mobil	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Robert R. "Rob" Simmons

SP	Fairfield Conn	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
	Fleet Bank	$15,001 - $50,000	INTEREST	$1 - $200	
DC	Fleet Bank	$1 - $1,000	INTEREST	$1 - $200	
SP	Fleet Bank	$1,001 - $15,000	INTEREST	$1 - $200	
SP	General Electric	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	
SP	Human Genome Services	$15,001 - $50,000	DIVIDENDS	NONE	
DC	Human Genome Services	$1,001 - $15,000	DIVIDENDS	NONE	
SP	IAC Interactive Services	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P
DC	IAC Interactive Services	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
SP	IBM	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
SP	Johnson &Johnson	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
SP	Kimberly Clark	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
DC	Kimco Realty	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
SP	Kimco Realty	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Robert R. "Rob" Simmons

DC	Laboratory Corp of America	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
SP	Laboratory Corp of America	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P
DC	Medtronic	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
SP	Medtronic	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P
SP	Microsoft	$1,001 - $15,000		NONE	
DC	Microsoft	$1,001 - $15,000		$1 - $200	
SP	Millenium Pharmaceuticals	$15,001 - $50,000		NONE	
DC	Millenium Pharmaceuticals	$1,001 - $15,000	DIVIDENDS	NONE	
SP	Neenah Paper	$1 - $1,000	SPINOFF	$1 - $200	Other
DC	Newell Rubbermaid	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	Newell Rubbermaid	$100,001 - $250,000	DIVIDENDS	$5,001 - $15,000	
SP	Paffard GST	$100,001 - $250,000	DIVIDENDS/INTEREST	$201 - $1,000	
DC	PPG Industries	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	Proctor & Gamble	$100,001 - $250,000	DIVIDENDS	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Robert R. "Rob" Simmons

SP	Royal Dutch Petroleum	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	S
	Sage Hill Camp, Jamaica, VT	$250,001 - $500,000	Other: Farm	NONE	
DC	Schwab Money Market Fund	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
SP	Schwab Money Market Fund	$15,001 - $50,000	INTEREST	$201 - $1,000	
SP	T. Rowe Price	$15,001 - $50,000	Other:IRA	$1,001 - $2,500	
DC	Texas Instruments	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	Texas Instruments	$1,001 - $15,000	DIVIDENDS	$1,001 - $2,500	
SP	The Southern Company	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P
DC	The Southern Company	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
DC	THQ, Inc.	$15,001 - $50,000		NONE	
DC	Toyota Motors	$1,001 - $15,000	DIVIDENDS	$1,001 - $2,500	
SP	TVA Bonds	$15,001 - $50,000	INTEREST	$201 - $1,000	
DC	U.S. Treasury Notes	$1,001 - $15,000	INTEREST	$201 - $1,000	
SP	US Treasury Notes	$1,001 - $15,000	INTEREST	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Robert R. "Rob" Simmons

JT	Vantage Point #1, Stratton, VT	$100,001 - $250,000	RENT	$15,001 - $50,000	
SP	Veritas Software	$15,001 - $50,000		NONE	
DC	Veritas Software	$15,001 - $50,000		NONE	
SP	Vodafone Group	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	Walmart Stores	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	
DC	Walmart Stores	$1,001 - $15,000	DIVIDENDS	$1 - $200	
DC	Weingarten Realty	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
SP	Wyeth	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	S
SP	Yahoo, Inc.	$15,001 - $50,000		NONE	
DC	Yahoo, Inc.	$1,001 - $15,000		NONE	
SP	Zimmer Holdings	$1,001 - $15,000		NONE	
DC	Zimmer Holdings	$1,001 - $15,000		NONE	

SCHEDULE IV - TRANSACTIONS

Name Robert R. "Rob" Simmons

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	Australian Government	P	02-23-04	$15,001 - $50,000
SP	Cathay General Bancorp	P	06-30-04	$15,001 - $50,000
SP	Electronic Arts Inc.	P	11-09-04	$1,001 - $15,000
SP	Ellington Conn G/O	P	02-20-04	$15,001 - $50,000
SP	IAC/ Interactivecorp	P	09-30-04	$15,001 - $50,000
SP	Laboratory Corp of American Hldgs	P	09-29-04	$15,001 - $50,000
SP	Medtronic	P	11-01-04	$15,001 - $50,000
SP	Southern Co	P	02-02-04	$15,001 - $50,000
SP	Zimmer Holdings Inc	P	05-20-04	$15,001 - $50,000
SP	Albertsons Inc	S	02-02-04	$1,001 - $15,000
SP	Albertsons Inc	S	02-02-04	$15,001 - $50,000
SP	Australian Government	S	09-15-04	$15,001 - $50,000

SCHEDULE IV - TRANSACTIONS

Name Robert R. "Rob" Simmons

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	CenturyTel Inc	S	06-28-04	$15,001 - $50,000
SP	CenturyTel Inc	S	10-06-04	$1,001 - $15,000
SP	CenturyTel Inc	S	10-06-04	$1,001 - $15,000
SP	CenturyTel Inc	S	10-06-04	$15,001 - $50,000
SP	Dupont (El) De Nemours & Co	S	11-04-04	$1,001 - $15,000
SP	Intl Business Machines Corp	S	05-20-04	$1,001 - $15,000
SP	Intl Business Machines Corp	S	05-20-04	$15,001 - $50,000
SP	Merck & Co Inc	S	11-17-04	$15,001 - $50,000
SP	Merck & Co Inc	S	11-17-04	$15,001 - $50,000
SP	Mony Group Inc	S	07-08-04	$15,001 - $50,000
SP	Royal Dutch Petroleum Co	S	04-06-04	$15,001 - $50,000
SP	U.S. Treasury Notes	S	02-15-04	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name Robert R. "Rob" Simmons

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	Wal-Mart Stores Inc	S	08-10-04	$15,001 - $50,000
SP	WYETH	S	05-20-04	$1,001 - $15,000
SP	WYETH	S	05-20-04	$1,001 - $15,000
DC	Australian Government	P	02-23-04	$1,001 - $15,000
DC	Cathay General Bancorp	P	06-30-04	$1,001 - $15,000
DC	Electronic Arts Inc	P	11-09-04	$1,001 - $15,000
DC	Exxon Mobil Corp	P	06-22-04	$1,001 - $15,000
DC	IAC/ Interactive Corp	P	09-30-04	$1,001 - $15,000
DC	Laboratory Corp of American Hldgs	P	09-29-04	$1,001 - $15,000
DC	Medtronic Inc	P	11-01-04	$1,001 - $15,000
DC	Southern Co	P	02-02-04	$1,001 - $15,000
DC	Southern Co	P	02-02-04	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name Robert R. "Rob" Simmons

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
DC	Zimmer Holdings	P	05-20-04	$1,001 - $15,000
DC	Australian Government	S	09-15-04	$1,001 - $15,000
DC	Avery Dennison Corp	S	06-22-04	$1,001 - $15,000
DC	Berkshire Hathaway Cl B	S	02-02-04	$1,001 - $15,000
DC	Cox Communications Inc	S	09-29-04	$1,001 - $15,000
DC	Merck & Co Inc	S	11-17-04	$1,001 - $15,000
DC	Merck & Co Inc	S	11-17-04	$1,001 - $15,000
DC	Mony Group Inc	S	07-08-04	$1,001 - $15,000
DC	Royal Dutch Petroleum Co	S	04-06-04	$15,001 - $50,000
DC	Medtronic	P	11-01-04	$15,001 - $50,000

SCHEDULE V - LIABILITIES

Name Robert R. "Rob" Simmons

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Chelsea Groton Service Corporation	Loan	$50,001 - $100,000
	Bank of America Visa	Revolving Charge Account	$10,001 - $15,000
	Citi-Aadvantage World Master Card	Revolving Charge Account	$15,001 - $50,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Robert R. "Rob" Simmons

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
American Shipbuilding Association	Nov. 30 - Dec. 2	Providence, RI - Naples, FL - Providence, RI	Y	Y	N	N/A
Republican Main Street Partnership	Mar. 16-20	Providence, RI - Bermuda - Washington, DC	Y	Y	Y	N/A
German Marshall Fund	Dec. 9 -	Providence, RI - Ft. Lauderdale, FL - Providence, RI	Y	Y	N	N/A

SCHEDULE VIII - POSITIONS

Name Robert R. "Rob" Simmons

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Treasurer	Simmons Family Limited Partnership, Philadelphia, PA

HOMELAND SECURITY COMMITTEE
SUBCOMMITTEE ON INTELLIGENCE, INFORMATION SHARING AND TERRORISM RISK ASSESSMENT
CHAIRMAN
SUBCOMMITTEE ON PREVENTION OF NUCLEAR AND BIOLOGICAL ATTACK
SUBCOMMITTEE ON EMERGENCY PREPAREDNESS, SCIENCE AND TECHNOLOGY

ARMED SERVICES COMMITTEE
SUBCOMMITTEE ON PROJECTION FORCES
VICE CHAIR
SUBCOMMITTEE ON READINESS

TRANSPORTATION AND INFRASTRUCTURE COMMITTEE
SUBCOMMITTEE ON RAILROADS
SUBCOMMITTEE ON HIGHWAYS AND TRANSIT
SUBCOMMITTEE ON COAST GUARD AND MARITIME TRANSPORTATION

CONGRESSMAN ROB SIMMONS

HOUSE OF REPRESENTATIVES
SECOND DISTRICT, CONNECTICUT

HAND DELIVERED

June 14, 2005

The Honorable Jeff Trandahl
The Clerk of the United States House of Representatives
Legislative Resource Center
B106 Cannon House Office Building
Washington, D.C. 20515

LEGISLATIVE RESOURCE CENTER
2005 JUN 14 AM 9:17
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

Dear Mr. Trandahl: Jeff: MC

Please make the following amendments to my 2003 and 2004 Personal Financial Disclosure Statements.

On my 2004 Statement:

- SP and DC holdings of Australian Bonds and SP holdings of US Treasury Bonds were fully redeemed and the year-end value should have indicated "zero."
- SP holdings of Cathay Pacific should have been listed as one holding, not two. The year-end asset was $15,000 - $50,000, the type of income was "dividends" and the amount of income was $1- $200. Cathay Pacific was purchased on 24 June 2004. The Cathay Pacific entry listing income as interest should be deleted.
- SP holdings of Century Telephone were sold on 24 June 2004 and 1 October 2004 resulting in a year-end value of "zero." The type of income was "dividends and capital gains" and the amount of income was $50,001 - $100,000.
- SP holdings of Royal Dutch Petroleum were sold on 1 April 2004 resulting in a year-end value of "zero." The type of income was "dividends and capital gains" and the amount of income was $15,001 - 50, 000.
- I indicated that SP Neenah Paper holdings were spun off. The date of acquisition is 30 November 2004 and the company it was spun off of is Kimberly Clark.
- SP T. Rowe Price IRA account contains only shares of the T Rowe Price Growth Fund.
- My son has had holdings of Century Telephone since approximately 1989. I inadvertently failed to disclose this until 2004.
- On Schedule V, the "loan" from Chelsea Groton is the mortgage on Sage Hill Camp, as reflected in prior Statements.
- On Schedule VII, the end date for the trip sponsored by the German Marshall Fund was December 11, 2004.

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(202) 225-3076

2 COURTHOUSE SQUARE
NORWICH, CT 06360
(860) 886-0139

TOLL FREE IN CONNECTICUT: (800) 822-4319

www.house.gov/simmons

37-39 PEARL STREET
ENFIELD, CT 06082
(860) 741-4053

On my 2003 Statement:

- SP holdings of BellSouth were fully redeemed on 24 July 2002 for $201 - $1000. The year-end value in 2002 should have been "zero," and the stock entry should not have appeared on my 2003 Statement.
- The 2003 entry for American Home Products Corporation is reflected on my 2004 Statement as Wyeth, due to a name change by the company.

Thank you for your attention to this matter.

All the best,

Rob Simmons
Member of Congress
Second District, Connecticut

Thanks for your help in making this an accurate and complete statement, which is our goal.

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2005 JUN 14 AM 9:17
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
2005 MAY 10 PM 2:33 48

Michael (Mike) K. Simpson
(Full Name)

786 Hoff Drive, Blackfoot, 83221
(Mailing Address)

(202) 225-5531
(Daytime Telephone)

HAND DELIVERED
(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State. Idaho Distnct. 2nd	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X] No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ] No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X] No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X] No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ] No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ] No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X] No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ] No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Mike Simpson	MAY, 08, 2005

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Name Michael Simpson	Page 1 of 1

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Bechtel BWXT Idaho, LLC	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

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Name Michael Simpson | Page 1 of 1

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples. Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2004	$2,000
XYZ Magazine	Article	Aug. 13, 2004	$500
N/A			

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name Michael Simpson

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Mega Corp. Stock					X								X										X								
DC	*Examples* Simon & Schuster			Indefinite																Royalties									X			
JT	1st Bank of Paducah, KY accounts						X									X										X						
SP	Morgan Stanley				X									X							NA											
	Morgan Stanley				X									X							NA											
	PERSI				X											X					NA											
SP	INEEL						X							X			X				NA											
	Edward Jones							X						X			X								X							
SP	Piper Jaffray					X								X			X						X									

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Michael Simpson

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Morgan Stanley			X										X								X										
	Simpson Properties						X								X											X						
	Dental Practice Contract					X										X									X							
SP	40 acres (farmground)					X									X										X							
	(½ interest Blackfoot, Id.)						X																									
SP	Farm														X											X						

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Morgan Stanley

STATEMENT OF YOUR ACCOUNT

FOR MONTH ENDING DECEMBER 31, 2004

Your Financial Advisor
WILLIAM BROWN
FIRST VICE PRESIDENT
MORGAN STANLEY
670 SOUTH WOODRUFF AVE
IDAHO FALLS, ID 83401
(208) 525-1301

Account Number [redacted]

KATHERINE SIMPSON
786 HOFF DR
BLACKFOOT ID 83221-1553

Householding Anniv. Date:
07/28/2003

Access Your Account at:
www.morganstanley.com/online

Asset Summary

	Value	% of Asset
Money Market Funds	$0.00	0.0%
Stocks	11,472.50	100.0
Municipal Bonds	0.00	0.0
Corporate Fixed Income	0.00	0.0
Government Securities	0.00	0.0
Mutual Funds	0.00	0.0
Unit Investment Trusts	0.00	0.0
Certificates of Deposit	0.00	0.0
Annuities/Insurance	0.00	0.0
Other	0.00	0.0
Asset Value	$11,472.50	100.0%
Debit Balance	-19.35	
Total Asset Value	$11,453.15	

Activity Summary

Total Asset Value September 30 2004		$8,985.65
Cash/Money Market Activity		
Closing Balance 9/30	-$23.35	
Credits To Your Account		
Dividends and Interest	4.00	
Deposits	0.00	
Sales Proceeds/Redemptions	0.00	
Other Credits	0.00	
Total Credits	4.00	
Debits To Your Account		
Withdrawals	0.00	
Funds to Purchase Securities	0.00	
Other Debits	0.00	
Total Debits	0.00	
Closing Balance 12/31	-19.35	
Net Change Cash/Money Market Activity		4.00
Changes In Asset Value		
Value of Priced Assets 9/30	$9,009.00	
Securities Bought	0.00	
Securities Received	0.00	
Securities Sold/Redeemed	0.00	
Securities Delivered	0.00	
Transactions at Fund Company	0.00	
Change In Value of Priced Assets	2,4[redacted]	
Value of Priced Assets 12/31	11,472.50	
Net Change In Asset Value		2,463.50
Total Asset Value as of December 31 2004		$11,453.15

Income Summary

	This Month	Year-To-Date
Money Market Funds	$0.00	$0.00
Stocks	4.00	16.00
Municipal Bonds	0.00	0.00
Corporate Fixed Income	0.00	0.00
Government Securities	0.00	0.00
Mutual Funds	0.00	0.00
Unit Investment Trusts	0.00	0.00
Certificates of Deposit	0.00	0.00
Other	0.00	0.00
Total Income	$4.00	$16.00
Taxable Income	$4.00	$16.00
Tax Exempt Income	$0.00	$0.00

Investments and services are offered through Morgan Stanley DW Inc., member SIPC

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Morgan Stanley

STATEMENT OF YOUR ACCOUNT
FOR MONTH ENDING DECEMBER 31, 2004

KATHERINE SIMPSON
788 HOFF DR

Account Number [redacted]

ASSET DETAILS

Cash and Money Market Funds	Amount	Pct of Assets	Est Yrly Income
DEBIT BALANCE	-19.55	---	---
Total Cash and Money Market Funds	$19.55	0%	
Net Change Since Last Statement	$4.00		

Annualized 30-Day Yields	
Liquid Asset Fund	1.60%
Tax-Free Daily Income Tr	1.08%
U.S. Gov't Money Market Tr	1.47%
CA Tax-Free Daily Income Tr	1.06%
New York Muni Money Market	1.06%

Stocks		Current Price	Value	Pct of Assets	Est Yrly Income	Dividend Yield	Symbol	Additional Information
Common Stocks								
100	* AGERE SYSTEMS CLASS A	1.37	137.00	1.2%	0	0.00%	AGR'A	
50	* BROCADE COMM SYS	7.64	382.00	3.4%	0	0.00%	BRCD	
100	* CISCO SYS INC	19.32	1,932.00	16.8%	0	0.00%	CSCO	
200	* DELTA AIRLINES	7.48	1,496.00	13.0%	0	0.00%	DAL	
100	* INTEL CORP	23.39	2,339.00	20.4%	32	1.36%	INTC	Next Dividend Payable 03/05
100	* ORACLE CORP	13.72	1,372.00	12.0%	0	0.00%	ORCL	
100	* SINA.COM	32.06	3,206.00	27.9%	0	0.00%	SINA	
100	* SUN MICROSYSTEMS INC	5.59	559.00	4.7%	0	0.00%	SUNW	
50	* VIGNETTE CORPORATION	1.39	69.50	0.6%	0	0.00%	VIGN	
Total Stocks			$11,472.50	100.0%	32	.27%		
Net Change Since Last Statement			$2,463.50					

Asset Summary	Value	Est Yrly Income
Total Asset Value	$11,253.18	$32
Total Net Change In Priced Assets Since Last Statement	$2,463.50	

[redacted]

Morgan Stanley

STATEMENT OF YOUR ACCOUNT
FOR MONTH ENDING DECEMBER 31, 2004

KATHERINE SIMPSON
786 HOFF DR

Account Number
[redacted]

Morgan Stanley Margin Loan Rates

Loan Amount	Rate
$0 - 9,999	9.125%
$10,000 - 24,999	9.000%
$25,000 - 49,999	8.000%
$50,000 - 99,999	7.875%
$100,000 - 499,999	6.625%
$500,000 - 999,999	6.125%
$1,000,000 & over	5.750%

EFFECTIVE DATE: December 15, 2004
PREVIOUS CHANGE: November 11, 2004

CREDITS TO YOUR ACCOUNT

Dividends and Interest

Date	Activity	Description	Amount	Income Category
Taxable Income				
12-01	Dividend	INTEL CORP	4.00	Stocks
		Total Dividends and Interest	$4.00	

See Income Summary on page 1 for the month-to-date and year-to-date amounts per income category.

Total Credits To Your Account $4.00 Year-To-Date $16.00

ADDITIONAL ACCOUNT INFORMATION

Morgan Stanley Fund Summary	YTD Dividends	YTD Cap Gains	YTD Taxes	Features
U.S. GOV'T MONEY MARKET TR	0.00	0.00	0.00	Reinvest Dividends
Totals	$0.00	$0.00	$0.00	

[redacted]

Investments and services are offered through Morgan Stanley DW Inc., member SIPC.

KATHERINE SIMPSON
788 HOFF DR

Account Number
[redacted]

Morgan Stanley Fund Summary

U.S. GOV'T MONEY MARKET TR

Following are the Fund's 30-day average annualized yields during the past quarter: October 1.05%, November 1.23%, and December 1.47%.

Messages

Consolidated Statement of Financial Condition (in thousands of dollars):
At 11/30/04, Morgan Stanley DW Inc. had net capital of $1,129,792, which exceeded the SEC's minimum requirement by $1,037,728.
A copy of the Morgan Stanley DW Inc. Consolidated Statement of Financial Condition at 11/30/04 can be viewed online at the Morgan Stanley Web site http://www.morganstanley.com/aboutir/shareholder/morganstanley_dw_inc.pdf, or may be mailed to you at no cost by calling toll free 1(866)279-4498, after February 14, 2005.

[redacted]

KATHERINE SIMPSON
786 HOFF DR

Account Number
[redacted]

INDIVIDUAL EQUITY RATINGS

DESCRIPTION	QUANTITY	CURRENT-PRICE	MARKET-VALUE	MORGAN STANLEY RESEARCH RATING	INDUSTRY VIEW	VOLATILITY	ADDITIONAL RESEARCH NAME	RATING
AGERE SYSTEMS CLASS A	100	1.37	137.00	Equal-Weight	In-Line	V	S&P	3-STARS (Hold)
CISCO SYS INC	100	19.32	1,932.00	Overweight	Attractive	V	S&P	4-STARS (Accum)
DELTA AIRLINES	200	7.48	1,496.00	Equal-Weight	In-Line	V	S&P	3-STARS (Hold)
INTEL CORP	100	23.39	2,339.00	Equal-Weight	In-Line	-	S&P	3-STARS (Hold)
ORACLE CORP	100	13.72	1,372.00	Overweight	In-Line	V	S&P	4-STARS (Accum)
SUN MICROSYSTEMS INC	100	5.39	539.00	Underweight	In-Line	V	Argus	HOLD

Independent, third-party research on equity securities of certain companies covered by Morgan Stanley Equity Research is available to U.S. customers of Morgan Stanley at no cost. Customers can access this research by visiting www.morganstanley.com/equityresearch, by calling 800-624-2063 or by contacting a Morgan Stanley representative to request that a copy of this research be sent to them.

Research does not provide individually tailored investment advice. Research reports are prepared without regard to the individual financial circumstances and objectives of persons who receive them. The securities and other financial instruments discussed in any report may not be suitable for or available to all investors. An investor's decision to buy or sell a stock should depend on individual circumstances (such as the investor's investment objectives, financial situation, investment horizon and existing holdings) and other considerations. Morgan Stanley recommends that investors independently evaluate particular investments and strategies, and encourages investors to seek the views of a financial adviser. The appropriateness of a particular investment or strategy will depend on an investor's individual circumstances and objectives as well as market conditions at the time. For additional information, please contact a Morgan Stanley representative.

RESEARCH RATINGS DEFINITIONS

Morgan Stanley Stock Ratings
Overweight (O) : The stock's total return is expected to exceed the average total return of the analyst's industry (or industry team's) coverage universe, on a risk-adjusted basis, over the next 12-18 months.
Equal-Weight (E) : The stock's total return is expected to be in line with the average total return of the analyst's industry (or industry team's) coverage universe, on a risk-adjusted basis, over the next 12-18 months.
Underweight (U) : The stock's total return is expected to be below the average total return of the analyst's industry (or industry [redacted] team's) coverage universe, on a risk-adjusted basis, over the next 12-18 months.

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KATHERINE SIMPSON
786 HOFF DR

Account Number [redacted]

RESEARCH RATINGS DEFINITIONS

Morgan Stanley Stock Ratings(continued)
More volatile (V) : We estimate that this stock has more than a 25% chance of a price move (up or down) of more than 25% in a month, based on a quantitative assessment of historical data, or in the analyst's view, it is likely to become materially more volatile over the next 1-12 months compared with the past three years. Stocks with less than one year of trading history are automatically rated as more volatile (unless otherwise noted). We note that securities that we do not currently consider "more volatile" can still perform in that manner.

Morgan Stanley Industry Views
Attractive (A) : The analyst expects the performance of his or her industry coverage universe over the next 12-18 months to be attractive vs. the relevant broad market benchmark named on the cover of the corresponding report.
In-Line (I) : The analyst expects the performance of his or her industry coverage universe over the next 12-18 months to be in line with the relevant broad market benchmark named on the cover of the corresponding report.
Cautious (C) : The analyst views the performance of his or her industry coverage universe over the next 12-18 months with caution vs. the relevant broad market benchmark named on the cover of the corresponding report.
Unless otherwise specified, the time frame for Morgan Stanley price targets is 12 to 18 months.

S&P
5-STARS (Buy) : Stock expected to substantially outperform the S&P 500 over the next 12 months.
4-STARS (Accum) : Stock expected to outperform the S&P 500 over the next 12 months.
3-STARS (Hold) : Stock expected to perform in line with the S&P 500 over the next 12 months.
2-STARS (Avoid) : Stock expected to underperform the S&P 500 over the next 12 months.
1-STARS (Sell) : Stock expected to substantially underperform the S&P 500 over the next 12 months.

Argus
Buy (B) : Stock expected to deliver a risk-adjusted return that beats the market over the next 12 months.
Hold (H) : Stock expected to perform in line with the market on a risk-adjusted basis over the next 12 months.
Sell (S) : Stock expected to underperform the market on a risk-adjusted basis over the next 12 months.

"NAV" appearing for either Morgan Stanley or an independent third party research provider indicates that the ratings for this company are not available because under Morgan Stanley policy and/or applicable regulations, Morgan Stanley may be precluded from issuing or providing such information with respect to this company at this time, or coverage is otherwise suspended and consequently research reports should not be relied upon for this information.

The securities ratings that appear here have been taken from research reports prepared by Morgan Stanley Equity Research as well as reports prepared by independent third party research providers who were selected by Morgan Stanley's Independent Consultant and are provided for information purposes only. The independent third party research reports were prepared without input from Morgan Stanley. Morgan Stanley does not represent that these reports are accurate or complete. The independent third party research provider whose rating is shown for each security may not be representative of the ratings assigned to that security by other independent third party research providers or by Morgan Stanley. Research reports from such independent third party research providers are generally available on our website, as well as current and historical ratings for the providers. You are encouraged [redacted] review this and all other relevant information available regarding your investment. Different providers use different terms and systems to describe the recommendations in their research reports. For example, Morgan Stanley uses a relative rating system including terms such as Overweight, Equal-weight or Underweight (see explanations within definitions section). In addition, Morgan Stanley applies an industry rating system which compares the analyst's view of the industry to the broader market benchmark. A rating system using terms such as buy, hold and sell may not be equivalent to our rating system. Investors should carefully read the

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Morgan Stanley

RETIREMENT ACCOUNT
FOR MONTH ENDING DECEMBER 31, 2004

Your Financial Advisor
WILLIAM BROWN
FIRST VICE PRESIDENT
MORGAN STANLEY
670 SOUTH WOODRUFF AVE
IDAHO FALLS, ID 83401
(208) 525-1301

KATHERINE SIMPSON
788 HOFF DR
BLACKFOOT ID 83221-1553

Account Number
[redacted]
IRA Standard Spousal
Dated 05/26/99
Householding Anniv. Date:
07/28/2003

Access Your Account at:
www.morganstanley.com/online

Asset Summary

	Value	% of Asset
Money Market Funds	$0.00	0.0%
Stocks	98.88	0.3
Municipal Bonds	0.00	0.0
Corporate Fixed Income	0.00	0.0
Government Securities	0.00	0.0
Mutual Funds	29,445.75	99.7
Unit Investment Trusts	0.00	0.0
Certificates of Deposit	0.00	0.0
Annuities/Insurance	0.00	0.0
Other	0.00	0.0
Asset Value	$29,544.63	100.0%
Cash	0.00	
Total Asset Value	$29,544.63	

Income Summary

	This Month	Year-To-Date
Money Market Funds	$0.00	$0.00
Stocks	0.00	0.00
Municipal Bonds	0.00	0.00
Corporate Fixed Income	0.00	0.00
Government Securities	0.00	0.00
Mutual Funds	0.00	0.00
Unit Investment Trusts	0.00	0.00
Certificates of Deposit	0.00	0.00
Other	0.00	0.00
Total Income	$0.00	$0.00

Activity Summary

Total Asset Value September 30 2004		$26,334.80
Cash/Money Market Activity		
Closing Balance 9/30	$0.00	
Credits To Your Account		
Dividends and Interest	0.00	
Deposits	0.00	
Sales Proceeds/Redemptions	0.00	
Other Credits	0.00	
Total Credits	0.00	
Debits To Your Account		
Withdrawals	0.00	
Funds to Purchase Securities	0.00	
Other Debits	0.00	
Total Debits	0.00	
Closing Balance 12/31	0.00	
Net Change Cash/Money Market Activity		0.00
Changes in Asset Value		
Value of Priced Assets 9/30	$26,334.80	
Securities Bought	0.00	
Securities Received	0.00	
Securities Sold/Redeemed	0.00	
Securities Delivered	0.00	
Transactions at Fund Company	0.00	
Change in Value of Priced Assets	$[redacted]	
Value of Priced Assets 12/31	29,544.63	
Net Change in Asset Value		3,209.83
Total Asset Value as of December 31 2004		$29,544.63

Investments and services are offered through Morgan Stanley DW Inc., member SIPC.

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Morgan Stanley

RETIREMENT ACCOUNT
FOR MONTH ENDING DECEMBER 31, 2004

KATHERINE SIMPSON
786 HOFF DR

Account Number
[redacted]

ASSET DETAILS

Cash and Money Market Funds	Amount	Pct of Assets	Est Yrly Income
CASH	.00	---	---
Total Cash and Money Market Funds	$.00		$0
Net Change Since Last Statement	$.00		

Annualized 30 Day Yields
Liquid Asset Fund 1.60%
U.S. Gov't Money Market Tr 1.47%

Stocks	Current Price	Value	Pct of Assets	Est Yrly Income	Dividend Yield	Symbol	Additional Information
Common Stocks							
16 IVILLAGE INC.	6.18	98.88	0.3%	0	0.00%	IVIL	
Total Stocks		$98.88	0.3%	$0	0.00%		
Net Change Since Last Statement		$2.88					

Mutual Funds	Current Price	Value	Pct of Assets	Est Yrly Income	Distribution Rate	Fund Plan Number	Symbol	Dividend/ Cap Gains Option
Other Mutual Funds								
241.950 VAN KAMPEN EMERGING GROWTH C	34.0600	8,240.82	27.9%	N/A	N/A		ACEFX	Reinv/Reinv
319.114 MFS EMERGING GROWTH FUND C	29.4900	9,410.67	31.9%	N/A	N/A		MFECX	Reinv/Reinv

[redacted]

Investments and services are offered through Morgan Stanley DW Inc., member SIPC.

Morgan Stanley

RETIREMENT ACCOUNT
FOR MONTH ENDING DECEMBER 31, 2004

KATHERINE SIMPSON
786 HOFF DR

Account Number
[redacted]

Mutual Funds	Current Price	Value	Pct of Assets	Est Yrly Income	Distribution Rate	Fund Plan Number	Symbol	Dividend/ Cap Gains Option
Other Mutual Funds								
202.923 HUNDER NET NET C	18.2100	3,695.23	12.5%	N/A	N/A		MNNCX	Reinv/Reinv
488.777 ALLIANCEBER LARGE-CAP GRW C	16.5700	8,099.03	27.4%	N/A	N/A		APGCX	Reinv/Reinv
Total Mutual Funds		$29,544.63	99.9%	N/A	N/A			
Net Change Since Last Statement		$3,206.96						

Asset Summary	Value	Est Yrly Income
Total Asset Value	$29,544.63	$0
Total Net Change In Priced Assets Since Last Statement	$3,209.83	

ADDITIONAL ACCOUNT INFORMATION

Morgan Stanley Fund Summary	YTD Dividends	YTD Cap Gains	YTD Taxes	Features
LIQUID ASSET FUND	0.00	0.00	0.00	Reinvest Dividends
Totals	$0.00	$0.00	$0.00	

LIQUID ASSET FUND
Following are the Fund's 30-day average annualized yields during the past quarter: October 1.22%, November 1.39%, and December 1.60%.

Retirement Recap	2004	2003
Account Valuation	29,544.63	27,066.37

[redacted]

KATHERINE SIMPSON
786 HOFF DR

Account Number
[redacted]

Messages

Consolidated Statement of Financial Condition (in thousands of dollars):
At 11/30/04, Morgan Stanley DW Inc. had net capital of $1,129,792, which exceeded the SEC's minimum requirement by $1,037,728.
A copy of the Morgan Stanley DW Inc. Consolidated Statement of Financial Condition at 11/30/04 can be viewed online at the Morgan Stanley Web site http://www.morganstanley.com/about/ir/shareholder/morganstanley_dw_inc.pdf, or may be mailed to you at no cost by calling toll free 1(866)279-4498, after February 14, 2005.

[redacted]

Morgan Stanley

RETIREMENT ACCOUNT
FOR MONTH ENDING DECEMBER 31, 2004

Your Financial Advisor
WILLIAM BROWN
FIRST VICE PRESIDENT
MORGAN STANLEY
670 SOUTH WOODRUFF AVE
IDAHO FALLS, ID 83401
(208) 525-1301

MICHAEL SIMPSON
786 HOFF DR
BLACKFOOT ID 83221-1553

Account Number
[redacted]
IRA STANDARD
Dated 05/26/99
Householding Anniv. Date:
07/28/2003

Access Your Account at:
www.morganstanley.com/online

Asset Summary

	Value	% of Asset
Money Market Funds	$240.52	1.0%
Stocks	0.00	0.0
Municipal Bonds	0.00	0.0
Corporate Fixed Income	0.00	0.0
Government Securities	0.00	0.0
Mutual Funds	21,704.29	99.0
Unit Investment Trusts	0.00	0.0
Certificates of Deposit	0.00	0.0
Annuities/Insurance	0.00	0.0
Other	0.00	0.0
Asset Value	$21,944.81	100.0%
Cash	0.00	
Total Asset Value	$21,944.81	

Income Summary

	This Month	Year-To-Date
Money Market Funds	$0.27	$0.87
Stocks	0.00	0.00
Municipal Bonds	0.00	0.00
Corporate Fixed Income	0.00	0.00
Government Securities	0.00	0.00
Mutual Funds	0.00	0.00
Unit Investment Trusts	0.00	0.00
Certificates of Deposit	0.00	0.00
Other	0.00	0.00
Total Income	$0.27	$0.87

Activity Summary

Total Asset Value September 30 2004		$19,580.31
Cash/Money Market Activity		
Closing Balance 9/30	$240.06	
Credits To Your Account		
Dividends and Interest	0.46	
Deposits	0.00	
Sales Proceeds/Redemptions	0.00	
Other Credits	0.00	
Total Credits	0.46	
Debits To Your Account		
Withdrawals	0.00	
Funds to Purchase Securities	0.00	
Other Debits	0.00	
Total Debits	0.00	
Closing Balance 12/31	240.52	
Net Change Cash/Money Market Activity		0.46
Changes in Asset Value		
Value of Priced Assets 9/30	$19,340.25	
Securities Bought	0.00	
Securities Received	0.00	
Securities Sold/Redeemed	0.00	
Securities Delivered	0.00	
Transactions at Fund Company	0.00	
Change in Value of Priced Assets	2,364.04	
Value of Priced Assets 12/31	21,704.29	
Net Change in Asset Value		2,364.04
Total Asset Value as of December 31 2004		$21,944.81

Investments and services are offered through Morgan Stanley DW Inc., member SIPC

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Morgan Stanley

RETIREMENT ACCOUNT
FOR MONTH ENDING DECEMBER 31, 2004

MICHAEL SIMPSON
786 HOFF DR

Account Number [redacted]

ASSET DETAILS

Cash and Money Market Funds	Amount	Pct of Assets	Est Yrly Income
CASH	.00	---	---
LIQUID ASSET FUND	240.52	1.0%	$
Total Cash and Money Market Funds	$240.52	1.0%	$$
Net Change Since Last Statement	$346		

Annualized 30-Day Yields	
Liquid Asset Fund	1.60%
U.S. Gov't Money Market Tr	1.47%

Mutual Funds		Current Price	Value	Pct of Assets	Est Yrly Income	Distribution Rate	Fund Plan Number	Symbol	Dividend/ Cap Gains Option
Other Mutual Funds									
179.222	VAN KAMPEN EMERGING GROWTH C	34.0600	6,104.30	27.9%	N/A	N/A		ACEFX	Reinv/Reinv
234.551	MFS EMERGING GROWTH FUND C	29.4900	6,916.91	31.5%	N/A	N/A		MFECX	Reinv/Reinv
150.314	MUNDER NET NET C	18.2100	2,737.22	12.5%	N/A	N/A		MNNCX	Reinv/Reinv
358.833	ALLIANCEBER LARGE-CAP GRW C	16.5700	5,945.86	27.1%	N/A	N/A		APGCX	Reinv/Reinv
Total Mutual Funds			$21,704.29	99.0%	N/A	N/A			
Net Change Since Last Statement			$2,364.04						

Asset Summary	Value	Est Yrly Income
Total Asset Value	$21,944.81	$$
Total Net Change In Priced Assets Since Last Statement	$2,364.04	

[redacted]

Investments and services are offered through Morgan Stanley DW Inc., member SIPC.

Morgan Stanley

RETIREMENT ACCOUNT
FOR MONTH ENDING DECEMBER 31, 2004

MICHAEL SIMPSON
786 HOFF DR

Account Number
[redacted]

CREDITS TO YOUR ACCOUNT

Dividends and Interest

Date	Activity	Description	Amount	Income Category
10-29	Dividend	LIQUID ASSET FUND	.08	Money Market Funds
11-30	Dividend	LIQUID ASSET FUND	.11	Money Market Funds
12-31	Dividend	LIQUID ASSET FUND	.27	Money Market Funds
		Total Dividends and Interest	$0.46	

See Income Summary on page 1 for the month-to-date and year-to-date amounts per income category.

Total Credits To Your Account $0.46 Year-To-Date $0.67

ADDITIONAL ACCOUNT INFORMATION

Money Market

Date	Activity	Description	Amount	Additional Information
		Closing Balance 9/30	240.06	
10-29	Dividend Reinvestment	LIQUID ASSET FUND	0.08	
11-30	Dividend Reinvestment	LIQUID ASSET FUND	0.11	
12-31	Dividend Reinvestment	LIQUID ASSET FUND	0.27	
		Closing Balance 12/31	240.52	

Morgan Stanley Fund Summary

	YTD Dividends	YTD Cap Gains	YTD Taxes	Features
LIQUID ASSET FUND	0.67	0.00	0.00	Reinvest Dividends
Totals	$0.67	$0.00	$0.00	

[redacted]

Investments and services are offered through Morgan Stanley DW Inc., member SIPC.

MICHAEL SIMPSON
786 HOFF DR

Account Number
[redacted]

Morgan Stanley Fund Summary

LIQUID ASSET FUND

Following are the Fund's 30-day average annualized yields during the past quarter: October 1.22%, November 1.39%, and December 1.60%.

Retirement Recap

	2004	2003
Account Valuation	21,944.81	20,161.33

Messages

Consolidated Statement of Financial Condition (in thousands of dollars):
At 11/30/04, Morgan Stanley DW Inc. had net capital of $1,129,792, which exceeded the SEC's minimum requirement by $1,037,728.
A copy of the Morgan Stanley DW Inc. Consolidated Statement of Financial Condition at 11/30/04 can be viewed online at the Morgan Stanley Web site http://www.morganstanley.com/aboutir/shareholder/morganstanley_dw_inc.pdf, or may be mailed to you at no cost by calling toll free 1(866)279-4498, after February 14, 2005.

[redacted]

5067

PERSI

Public Employee Retirement System of Idaho

PERSI BASE PLAN BENEFITS STATEMENT

*****Important document: Please retain for future reference.*****

PERSI offers you a package of benefits that provides a strong foundation for your financial security. Your PERSI Base Plan Benefits Statement was prepared individually for you to help show you the value of your Base Plan benefits. With an understanding of your benefits, you will be in a better position to make personal financial planning decisions. This statement is not intended to be a comprehensive review of the provisions governing PERSI. Please refer to your Member Handbook or visit www.persi.state.id.us for additional information.

This statement does not cover your PERSI Choice Plan 401(k) account. For Choice Plan information, refer to your quarterly 401(k) statements, call toll-free 1-866-ID-PERSI or visit www.persi.state.id.us/choice.htm.

Based on information reported to and retained by PERSI, we have generated estimates of your PERSI Base Plan benefits and have summarized them in this statement. The estimates are based on the value of your benefits as of the statement date, and do not consider increases in value resulting from subsequent service, changes in salary, benefit enhancements, or inflationary adjustments.

THE VALUE OF YOUR BENEFITS

Your PERSI benefits may likely be your greatest financial asset. The value of your benefit is not merely the amount of contributions in your account. The value is actually far greater. Here's how:

When you retire, the PERSI Base Plan will pay you every month *for as long as you live*, and if you choose a Contingent Annuitant at retirement, after you die that person will continue receiving a benefit *for the rest of their life*.

You 'make back' every dollar you put into the PERSI Base Plan within about your first three and a half years of retirement. For instance, say you put $60,000 into the Base Plan during your career. If your monthly benefit is $1,500, you will receive your $60,000 back in just over three years. *But*, we will continue paying you that $1,500 (*plus* yearly Cost of Living Adjustments – COLAs) every month for the rest of your life. If you are retired for another 30 years, you will receive another $540,000 from the PERSI Base Plan (*plus* COLAs – so the value will really be much higher).

BENEFITS SUMMARY FOR MICHAEL K SIMPSON 106043

Based on Account information as of 06/30/04

RETIREMENT BENEFIT

Formula used to calculate your retirement benefit:

Months of Credited Service	204
x Average Monthly Salary	$ 1, 472. 21
x Statutory Multiplier	. 01917
x COLA Factor	1. 12430
= Annual Benefit	$ 6, 472. 98
÷ 12	
= Monthly Service Retirement Benefit	$ 539. 41

This estimate reflects the benefit you have earned thus far. It shows a regular retirement allowance at age 65 with no subsequent service and no future benefit enhancements. See the following sections for additional accrued benefits amounts.

DISABILITY BENEFIT

Formula used to calculate your disability benefit:

Months of Credited Service	
x Average Monthly Salary	
x Statutory Multiplier	
= Annual Benefit	
÷ 12	
= Monthly Disability Retirement Benefit	

Should you become disabled as defined by applicable law, you may be eligible to receive disability retirement benefits. You must be an active member to be eligible for this benefit. As an inactive member, you are not eligible for a disability benefit.

SEPARATION BENEFIT
(Your Account Balance)

Account balance as of 06/30/2003	$ 20, 746. 74
Contributions from 7/1/2003 to 06/30/04	
Accrued Interest 7/1/2003 to 06/30/04	$ 480. 37
Total Account as of 06/30/04	$ 21, 227. 11
Separation Benefit = **Total Account**	**$ 21, 227. 11**

Of your total account, your contributions are taxed or tax-deferred as follows:

Total Taxed Contributions	$ 218. 31
Total Tax-Deferred Contributions	$ 10, 346. 33
Total Interest (Tax-Deferred)	$ 10, 662. 47

A Separation Benefit is a lump-sum payment of your account balance plus interest. As an inactive member, your account balance and interest are available to you now. However, because you are vested to a lifetime retirement benefit, we suggest you consult with PERSI before withdrawing your funds as a Separation Benefit is paid in lieu of a retirement benefit and cancels any credited service. Your account balance and the interest you earn do not affect the amount of your retirement benefit. When you retire, you receive the retirement benefit amount calculated in the box above, not the account amount shown in this box. Generally, the total of your lifetime retirement benefit will far exceed your account balance.

DEATH BENEFIT

Member Contributions	$ 10, 564. 64
Accrued Interest	$ 10, 662. 47
Accumulated Contributions	$ 21, 227. 11
Death Benefit	**$ 21, 227. 11**

Beneficiaries:

Mary K Simpson	Primary	100%

If you die before retirement, a death benefit will be paid to your beneficiary(ies). If your beneficiary is your surviving spouse, he or she may choose an optional annuity benefit similar to the retirement benefit above.

RS-135
8/26/200-

Seq. No. 7277 106043

CREDITED SERVICE and AVERAGE MONTHLY SALARY

Total Months of Service as of 06/30/04	204
Average Monthly Salary 06/01/1993 to 11/30/1996 (Average gross salary paid during your highest 42 months)	$ 1,472.21

ACCRUED BENEFITS

Although you are not an active PERSI member, you are eligible for a retirement benefit once you meet the minimum age requirements. Should you return to PERSI-covered employment, you may earn subsequent credited service to improve your retirement benefits. Your retirement benefits are based on your total credited service and your highest consecutive average monthly salary over a 42-month period. You terminated employment as of 12/31/1998. The estimated monthly retirement benefits payable for your lifetime once you reach retirement would be:

Early Retirement at Age 55 on 10/01/2005	$ 303.15
Early Retirement at Age 60 on 10/01/2010	$ 458.50
Early Retirement at Age 62 on 10/01/2012	$ 490.86
Service Retirement at Age 65 on 10/01/2015	$ 539.41

Rule of 80/90: You will reach service retirement age first.

These estimates include Cost of Living adjustments from 12/31/1998 to 06/30/04.

Your early retirement amounts are equal to the Service Retirement amount reduced by early retirement factors. These estimates are based on the Service Retirement single life option, which is only one of several payment options available to you at retirement. The payment options include: a regular allowance covering your lifetime only, a reduced benefit in the form of a 100% or 50% Contingent Annuitant option covering your lifetime and the lifetime of a designated contingent annuitant thereafter, and if under Social Security Normal Retirement Age (65-67 depending on year of birth), options which would allow you to draw an increased retirement benefit until Social Security Normal Retirement Age and a reduced amount thereafter. These other options require information concerning your Social Security estimate and your Contingent Annuitant to calculate. See your Member Handbook for more information.

Cost of Living Adjustments (COLAs) will be added to your PERSI benefit annually. Historically, PERSI COLAs have averaged 3% per year, so the total value of your PERSI benefits is much larger than shown above.

Date of Birth: 09/1950
This statement has been prepared especially for:

MICHAEL K SIMPSON
786 HOFF DR
BLACKFOOT IDAHO 83221

BECHTEL BWXT IDAHO, L. L. C.

October 01, 2004 - December 31, 2004

For information call:
Vanguard Participant Services
(800) 523-1188
Or via the internet at: www.vanguard.com

KATHERINE SIMPSON
786 HOFF DR
BLACKFOOT ID 83221-1553

3266

A MESSAGE FROM YOUR PLAN SPONSOR

SAVE MORE IN 2005

Effective January 1, 2005, the IRS limit on regular employee pre-tax contributions to employer-sponsored retirement plans is $14,000. That's a $1,000 increase from the 2004 limit of $13,000. (Once you reach the $14,000 limit, your pre-tax contributions will automatically convert to after-tax.) Additionally, the total annual deferral limit including pre-tax, after-tax and company contributions has increased from $41,000 in 2004 to $42,000 in 2005.

The catch-up contribution limit was also raised. If you're eligible to make catch-up contributions, you'll be able to save an extra $4,000 in 2005. This is an increase from the 2004 limit of $3,000.

To be eligible for catch-up contributions, you must be age 50 or older by the end of the year and have contributed the lesser of the $14,000 IRS contribution limit or the plan's pre-tax contribution limit of 50% of your pay. Additionally, you must enroll for the catch-up contribution with the Benefits Office.

To start saving more, log on to www.vanguard.com or call Vanguard(R) Participant Services at 1-800-523-1188. Not registered for Web access? Sign up today at http://retirementplans.vanguard.com. You'll need your plan number (091194).

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BECHTEL BWXT IDAHO, L. L. C.

October 01, 2004 - December 31, 2004 Page 2 of 5

For information call:
Vanguard Participant Services
(800) 523-1188
Or via the internet at: www.vanguard.com

KATHERINE SIMPSON.

INEEL EMPLOYEE INVESTMENT PLAN
Plan No.: [redacted]

Balance	**$ 151,656.02**

Please check this statement for accuracy and notify Vanguard Participant Services of any discrepancies within 60 days.

YOUR ACCOUNT ACTIVITY

		This quarter	Year-to-date
	Opening balance	$ 135,622.70	$ 124,651.34
Contributions	PRE-TAX	$ 2,127.44	$ 7,886.21
	COMPANY MATCH	- 1,276.51	4,731.90
Earnings	Dividends/capital gains	$ 1,115.51	$ 2,544.84
	Unrealized gain/loss	11,521.92	11,860.90
Other transactions	Plan administration fees	-$ 8.06	-$ 19.17
	Closing balance	**$ 151,656.02**	**$ 151,656.02**

This section provides you with general information about your individual plan account. Any information labeled as Year-to-Date represents activity since January 1 of the current calendar year. Contributions shown here represent money that was received during the statement period shown above. Earnings are defined as the net change in your account value due to the reinvestment of dividends and/or interest as well as the change in Fund prices. Dividends paid by a Fund may cause a drop in the Fund price. This change may cause an unrealized loss in your Fund account, but it is offset by the dividend amount added to your account.

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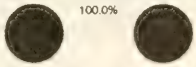
October 01, 2004 - December 31, 2004

For information call:
Vanguard Participant Services
(800) 523-1188
Or via the internet at: *www.vanguard.com*

KATHERINE SIMPSON

YOUR PLAN ALLOCATION

	Current asset mix	Contribution allocation
Stocks	100%	100.0%



This information will help you evaluate how your money is currently invested. Your overall investment mix should be based on your time frame for investing and your tolerance for risk.

HOW WE INVEST YOUR CONTRIBUTIONS AS OF 01/12/2005

Vanguard 500 Index Fund Investor Shares	100.0%

YOUR PAYROLL DEDUCTIONS AS OF 01/12/2005

PRE-TAX 8.00% of your salary

If you would like to change the amount you are contributing, please call Vanguard at the toll-free telephone number listed above.

MARKET VALUE BY FUND AND SOURCE

	PRE-TAX	COMPANY MATCH	TOTALS BY FUND
Vanguard 500 Index Fund Investor Shares	$ 98,442.81	$ 53,213.21	$ 151,656.02
Totals by source	**$ 98,442.81**	**$ 53,213.21**	**$ 151,656.02**

VALUE SUMMARY

	Opening balance	Contributions	Other transactions	Shares/units	Closing balance
Vanguard 500 Index Fund Investor Shares	$ 135,622.70	$ 3,403.95	$ 12,629.37	1,358.438	$ 151,656.02
Total value	$ 135,622.70	$ 3,403.95	$ 12,629.37		$ 151,656.02

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BECHTEL BWXT IDAHO, L. L. C.

October 01, 2004 - December 31, 2004

For information call:
Vanguard Participant Services
(800) 523-1188
Or via the internet at: *www.vanguard.com*

KATHERINE SIMPSON

TOTAL VESTED VALUE

	Closing balance	Vested percent	Vested value
PRE-TAX	$ 98,442.81	100.00%	$ 98,442.81
COMPANY MATCH	53,213.21	100.00	53,213.21
Total vested value			$ 151,656.02

Your vested balance is the amount of money you are entitled to if you terminate your service at your employer. The money you have had deducted from your pay is always 100% vested. The money contributed to the plan by your employer is vested based on your time in service. If you have questions regarding vesting or your vested balance, please call Vanguard at the toll-free telephone number shown above.

PERFORMANCE SUMMARY AS OF 12/31/2004

	Date fund started	3 months	1 year	3 years	5 years	10 years
Vanguard Prime Money Market Fund	06/04/1975	0.42%	1.11%	1.22%	2.80%	4.09%
Average Money Market Fund		0.27	0.60	0.68	2.22	3.54
INEEL Stable Value Fund	12/31/1990	0.99	4.29	4.96	5.48	6.14
Vanguard Total Bond Market Index Fund Investor Shares	12/11/1986	0.95	4.24	5.47	7.22	7.42
Lehman Aggregate Bond Index		0.95	4.34	6.20	7.71	7.72
Vanguard Asset Allocation Fund Investor Shares	11/03/1988	8.39	11.09	5.92	3.38	12.01
Asset Allocation Composite Index		6.49	9.89	5.94	2.40	11.63
Vanguard 500 Index Fund Investor Shares	08/31/1976	9.21	10.74	3.47	-2.38	12.00
S&P 500 Index		9.23	10.88	3.59	-2.30	12.07
Vanguard Windsor II Fund Investor Shares	06/24/1985	10.11	18.31	8.56	7.63	13.71
Russell 1000 Value Index		10.38	16.49	8.57	5.27	13.83
Vanguard Morgan Growth Fund Investor Shares	12/31/1968	11.22	10.47	4.16	-3.11	11.87
Russell 3000 Growth Index		9.66	6.93	0.26	-8.87	9.30
Vanguard PRIMECAP Fund Investor Shares	11/01/1984	9.75	18.31	7.13	2.16	15.78
S&P 500 Index		9.23	10.88	3.59	-2.30	12.07

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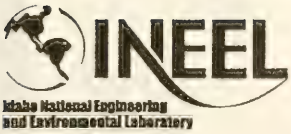
BECHTEL BWXT IDAHO, L. L. C.



October 01, 2004 - December 31, 2004

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Or via the internet at: www.vanguard.com

XATHERINE SIMPSON

PERFORMANCE SUMMARY AS OF 12/31/2004 (CONT'D.)

	Date fund started	3 months	1 year	3 years	5 years	10 years
Vanguard Capital Opportunity Fund Investor Shares	**08/14/1995**	**13.48**	**21.65**	**9.44**	**6.92**	**15.10***
Russell Midcap Growth Index		13.94	15.48	6.16	-3.36	11.23
Columbia Acorn Fund	**06/10/1970**	**12.44**	**21.51**	**15.34**	**12.38**	**16.71**
Russell 2500 Index		14.22	18.29	12.27	8.35	13.75
ING SmallCap Opportunities Fund	**05/05/1995**	**16.38**	**9.57**	**-5.86**	**-12.21**	**8.12***
Russell 2000 Growth Index		15.08	14.31	5.79	-3.57	7.12
Van Kampen Agg Growth Fund	**05/29/1996**	**11.38**	**15.09**	**1.93**	**-11.32**	**8.83***
Russell Midcap Growth Index		13.94	15.48	6.16	-3.36	11.23
Lord Abbett Mid Cap Value Fund Class A	**06/28/1983**	**13.16**	**24.10**	**11.85**	**18.30**	**17.08**
Russell Midcap Value Index		13.46	23.71	15.56	13.48	15.72
Boston Partners Small Cap Value II Fund Investor Class	**07/01/1998**	**13.86**	**16.47**	**14.40**	**26.10**	**17.07***
Russell 2000 Value Index		13.20	22.25	16.50	17.23	15.17
Vanguard International Growth Fund Investor Shares	**09/30/1981**	**14.35**	**18.95**	**9.55**	**-0.52**	**7.04**
MSCI EAFE Index		15.32	20.25	11.89	-1.13	5.62

— Not available for the time period. See "Date fund started".
* Since the fund's inception.

Since-inception performance figures for Vanguard or non-Vanguard funds greater than 10 years old or for Vanguard-managed company stock accounts [illegible] accounts greater than 10 years old are no longer printed on Vanguard statements. However, except for non-Vanguard funds, [illegible] information is available online at Access Vanguard™ at www.vanguard.com or by calling Participant Services.

Performance figures [illegible] of more than one year are expressed as average annual total returns.

Performance figures [illegible] the reinvestment of dividends and capital gains distributions.

"Standard & Poor's," "S&P®," "S&P 500®," "Standard & Poor's 500," "500," "S&P Midcap 400," "S&P Smallcap 600," and the names of S&P indexes are [illegible] of The McGraw-Hill Companies, Inc., and have been licensed for use by Vanguard Index Trust and The Vanguard Group, Inc. These mutual funds are not sponsored, endorsed, sold, or promoted by Standard & Poor's, and Standard & Poor's makes no representation regarding the advisability of investing in the funds.

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The total return data provided represent past performance, and the investment return and principal value of an investment will fluctuate so that an investor's shares, when redeemed, may be worth more or less than their original cost.

An investment in a money market fund is neither insured nor guaranteed by the U.S. government, and there is no assurance that the fund will be able to maintain a stable net asset value of $1 per share.

Vanguard funds are neither insured nor guaranteed by the U.S. government.

Vanguard is a registered trademark, and all Vanguard fund names are trademarks of The Vanguard Group, Inc.

THE Vanguard GROUP

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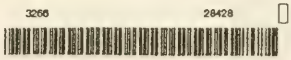

Account number: [redacted]
Statement type: Preferred
November 27 - December 31, 2004

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Edward Jones
Serving Individual Investors Since 1871

A Unique Understanding of Your Financial Needs

At Edward Jones, we believe the best investment recommendations are those tailored to your specific needs. That's why we work so hard to thoroughly understand your financial situation and your goals. The following is an overview of your investment and borrowing activity with Edward Jones. Working with your investment representative, use it to determine how we can help you meet other important financial goals. Call NEIL A. ANDERSON at 208-785-3370 or 800-927-0837.

Please refer to your account statement for the exact registration and more specific details regarding each account. Edward Jones statements are issued for each account holding securities in firm name with Edward Jones in March, June, September and December. Monthly statements (for months other than those previously referred to) will not be sent to you in months for which your only account activity is the payment of income on your Edward Jones money market account or your cash account balance.

Investment accounts	Account holder	Account number	Current value	Value one year ago
Profit sharing/separate account	MICHAEL K SIMPSON	[redacted]	$468,196.62	$415,049.98
Total investment accounts			$468,196.62	$415,049.98

Fund your IRA early. There may be a cost to waiting.
Waiting until April 15 every year to fund your IRA could be costly. Fund on the first business day of January instead. Waiting until tax day each year to fully fund your IRA for the prior year, could mean missing out on the potential of 15 months' tax-deferred growth annually. Contact your investment representative for details.

[redacted]

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Account number: [redacted]
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November 27 - December 31, 2004

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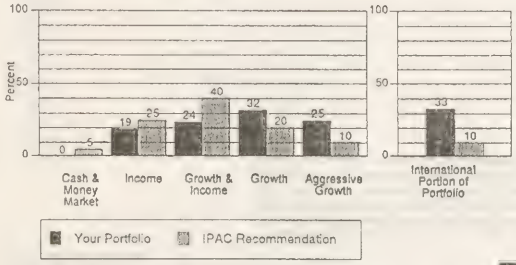
Are you taking advantage of diversification?



The value of diversification
Diversification refers to the way you spread your assets among different types of investments. Over the long term, it can help reduce risk and improve returns so you reach your goals. This graph compares the way you currently diversify your investments to the recommendations of the Edward Jones Investment Policy Advisory Committee. Your investment representative can help you determine the right diversification strategy based on your individual situation. (Totals include all the assets in the investment and retirement accounts listed under "A Unique Understanding of Your Financial Needs" on page 1 of the statement.)

[redacted]

We hope this overview of your relationship with Edward Jones provides useful information as you consider your financial decisions. Information reported from this point forward is specific to your individual investment and/or retirement account(s).

Please refer to the important [redacted] disclosures on the last page of this package.

Account number: [redacted]
Statement type: Preferred
November 27 - December 31, 2004

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Your Retirement Account Summary

	This period	Cumulative
2004 Contributions	$0.00	$0.00
2003 Contributions	$0.00	$0.00

Information Regarding Your 2005 Required Minimum Distribution (RMD)
For those age 70-1/2 or older, the IRS may require you to remove a minimum distribution from your retirement account by Dec. 31 2005. However, if you turn 70-1/2 in 2005, you may defer your 2005 RMD until April 1, 2006. If an RMD is due, Edward Jones will report that information to the Internal Revenue Service on IRS form 5498. Contact your investment representative for this calculation.

Summary of Your Income

Income from securities	This Period	Year-to-date
Money market dividends	$0.41	$1.03
Dividends	2,563.18	8,668.45
Capital gain distributions	388.13	388.13
Total	$2,951.70	$9,057.61

Your Estimated Interest and Dividends

The following is an estimated summary of your interest and dividend income for the next 12 months. It is based on a variety of factors. These factors, including distribution rates and amount of principal invested, are subject to change. Because they are estimates, the specific amounts listed here are not guaranteed by Edward Jones or by the underlying issuer(s) of the securities. Income from items with * is being reinvested.

		2005												
Mutual Funds	Quantity	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	Total
AIM PREMIER EQUITY FUND CL A*	3,221												41	41
AMERN HIGH INCOME TRUST FUND A*	3,628	299	299	299	299	299	299	299	299	299	299	299	299	3,588
BOND FUND OF AMERICA CL A*	3,219	169	169	169	169	169	169	169	169	169	169	169	169	2,028
FUNDAMENTAL INVESTORS FD CL A*	1,735			173			173			173			173	692
INCOME FUND OF AMERICA CL A*	2,966			459			459			459			459	1,836
NEW PERSPECTIVE FUND CL A*	2,166												556	556
NEW WORLD FUND CL A*	394												215	215
Total		468	468	1,100	468	468	1,100	468	468	1,100	468	468	1,912	8,956

[redacted]

Account number: [redacted]
Statement type: Preferred
November 27 - December 31, 2004

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EDWARD D JONES & CO CUSTODIAN
SIMPSON DENTAL OFFICE
FBO MICHAEL K SIMPSON PS
786 HOFF DR
BLACKFOOT ID 83221-1553

NEIL A. ANDERSON
PO BOX 778
BLACKFOOT ID 83221
208-785-3370
800-927-0837

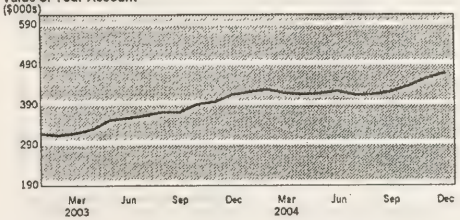
Value Summary (Held at Edward Jones)

Value on Dec 31	$468,196.62
Value on Nov 27	$455,419.15
Value one year ago	$415,049.98

Summary of Your Assets

Held at Edward Jones	Value on Dec 31	Value on Nov 27	Change in value
Cash & money market	$511.87	$511.46	$0.41
Mutual funds	467,684.75	454,907.69	12,777.06
Total at Edward Jones	$468,196.62	$455,419.15	$12,777.47

Value of Your Account



This chart shows how the value of your account has changed recently (includes only assets held at Edward Jones). While it's important to be aware of short-term results, don't lose sight of the long term. Edward Jones believes a long-term investment strategy offers the greatest potential for success.

Account number: [redacted]
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November 27 - December 31, 2004

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Mutual funds, continued	Our asset category	Current price	Current shares	Current value	Amount invested	Amount withdrawn
AMERICAN HIGH INCOME TRUST CL A Quote Symbol: AHITX	Aggressive Income	12.61	3,628.843	$45,759.71	$26,564.05	—
BOND FUND OF AMERICA CL A Quote Symbol: ABNDX	Income	13.65	3,219.436	43,945.30	26,572.52	—
FUNDAMENTAL INVESTORS FUND CL A Quote Symbol: ANCFX	Growth & Income	32.25	1,735.725	55,977.13	26,564.04	—
INCOME FUND OF AMERICA CL A Quote Symbol: AMECX	Growth & Income	18.56	2,966.023	55,049.39	26,564.04	—
NEW PERSPECTIVE FUND CL A Quote Symbol: ANWPX	Growth	27.72	2,166.987	60,068.88	26,564.03	—
NEW WORLD FUND CL A Quote Symbol: NEWFX	Growth	32.27	394.873	12,742.55	8,565.94	—
Total mutual funds				$467,684.75	—	—
Total estimated asset value				$468,196.62		

[redacted]

Account number: [redacted]
Statement type: Preferred
November 27 - December 31, 2004

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Your Assets at Edward Jones

Cash and money market funds	7-day current yield	7-day compounded yield	Current value
Retirement money market	0.95%	0.96%	$511.87
Total cash and money market funds			$511.87

Mutual funds	Our asset category	Current price	Current shares	Current value	Amount invested	Amount withdrawn
AIM AGGRESSIVE GROWTH FUND CL A Quote Symbol: AAGFX	Aggressive	10.41	3,865.607	$40,240.97	—	—
AIM CONSTELLATION FUND CL A Quote Symbol: CSTGX	Aggressive	22.84	1,577.109	36,021.17	27,305.88	—
AIM GLOBAL AGGRESSIVE GROWTH FUND CL A Quote Symbol: AGAAX	Aggressive	19.12	1,900.362	36,334.92	—	—
AIM GLOBAL AGGRESSIVE GROWTH FUND CL B Quote Symbol: AGABX	Aggressive	17.90	337.141	6,034.82	—	—
AIM INTERNATIONAL GROWTH FUND CL A Quote Symbol: AIIEX	Growth	20.13	1,651.793	33,250.59	—	—
AIM INTERNATIONAL GROWTH FUND CL B Quote Symbol: AIEBX	Growth	18.80	290.797	5,466.98	—	—
AIM PREMIER EQUITY FUND CL A Quote Symbol: AVLFX	Growth	9.88	3,221.443	31,827.86	—	—
AIM PREMIER EQUITY FUND CL B Quote Symbol: AVLBX	Growth	9.16	541.974	4,964.48	—	—

[redacted]

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Additions, continued

	Type	Date		Quantity	Amount per share	Rate	Amount	Where Invested
Income	Dividends	12/27	INCOME FUND OF AMERICA CL A AT DAILY ACCRUAL RATE	2918.292			$452.56	Reinvested
		12/27	BOND FUND OF AMERICA CL A AT DAILY ACCRUAL RATE	3204.738			200.33	Reinvested
		12/29	AMERN HIGH INCOME TRUST FUND A AT DAILY ACCRUAL RATE	3600.979			351.09	Reinvested
	Capital gains distributions Long-term	12/27	INCOME FUND OF AMERICA CL A	2918.292	0.133		$388.13	Reinvested
		Total income					$2,951.70	

Subtractions

	Date		Quantity	Price per share	Trade date	Amount	Source of Funds
Withdrawals to purchase securities	11/29	REINVESTMENT INTO AMERN HIGH INCOME TRUST FUND A	20.666	12.56		-$259.56	Income
	12/13	REINVESTMENT INTO FUNDAMENTAL INVESTORS FD CL A	14.327	31.24		-447.56	Income
	12/20	REINVESTMENT INTO NEW PERSPECTIVE FUND CL A	20.425	27.01		-551.67	Income
	12/20	REINVESTMENT INTO NEW WORLD FUND CL A	6.757	31.36		-211.91	Income
	12/21	REINVESTMENT INTO AIM PREMIER EQUITY FUND CL A	4.59	9.74		-44.71	Income
	12/27	REINVESTMENT INTO BOND FUND OF AMERICA CL A	14.698	13.63		-200.33	Income

[redacted]

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Account number: [redacted]
Statement type: Preferred
November 27 - December 31, 2004

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Summary of Your Investment Activity

Total cash and money market funds on Nov 27	$511.46
Additions	
Income	$2,951.70
Total additions	$2,951.70
Subtractions	
Withdrawals to purchase securities	-$2,951.29
Total subtractions	-$2,951.29
Total cash and money market funds on Dec 31	$511.87

Detail of Your Investment Activity

Additions

	Type	Date			Days	Rate	Amount	Where Invested
Income	Money market dividends	12/31	MONEY MARKET		39	0.83	0.41	Money market
	Type	**Date**		**Quantity**	**Amount per share**	**Rate**	**Amount**	**Where Invested**
	Dividends	11/29	AMERN HIGH INCOME TRUST FUND A AT DAILY ACCRUAL RATE	3580.313			$259.56	Reinvested
		12/13	FUNDAMENTAL INVESTORS FD CL A	1721.398	0.26		447.56	Reinvested
		12/20	NEW WORLD FUND CL A	388.116	0.546		211.91	Reinvested
		12/20	NEW PERSPECTIVE FUND CL A	2146.562	0.257		551.67	Reinvested
		12/21	AIM PREMIER EQUITY FUND CL A	3216.853	0.013		44.71	Reinvested
		12/27	INCOME FUND OF AMERICA CL A	2918.292	0.015		43.77	Reinvested

[redacted]

Account number: [redacted]
Statement type: Preferred
November 27 - December 31, 2004

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Subtractions, continued

	Date		Quantity	Price per share	Trade date	Amount	Source of Funds
Withdrawals to purchase securities	12/27	REINVESTMENT INTO INCOME FUND OF AMERICA CL A	20.946	18.53		-$388.13	Income
	12/27	REINVESTMENT INTO INCOME FUND OF AMERICA CL A	2.362	18.53		-43.77	Income
	12/27	REINVESTMENT INTO INCOME FUND OF AMERICA CL A	24.423	18.53		-452.56	Income
	12/29	REINVESTMENT INTO AMERN HIGH INCOME TRUST FUND A	27.864	12.60		-351.09	Income
	Total withdrawals to purchase securities					-$2,951.29	

What role will Social Security play in your future?
Join us February 8 as retirement planning specialist Gail Buckner discusses the current state and potential future of Social Security. Contact your investment representative for information about this free video presentation.

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ACCOUNT INFORMATION

Please see your account agreement forms for complete conditions governing your account. All transactions are subject to applicable rules of the exchange market and its clearing house where the trade occurred, as well as of the Securities Exchange Commission, the Federal Reserve Board and any applicable self-regulatory organizations. If you believe there has been an error made in your account, or if you have other concerns, please refer to the cover page of this statement for our contact information.

You can only withdraw $2,500 per day from a bank teller using your Edward Jones VISA debit card.

With questions regarding your mortgage or home equity loans, please refer to the separate loan statement issued for a description of fees and charges.

Account Protection - Edward Jones provides account protection for the net equity of your assets (except annuities and insurance) held in custody by Edward Jones for your account. Of that total, the Securities Investor Protection Corporation (SIPC) provides $500,000 of coverage, including $100,000 for claims of cash awaiting reinvestment (SIPC coverage). The remaining net equity is protected by Customer Asset Protection Company (CAPCO). This protection does not guard against market loss.

REGULATORY DISCLOSURES

Financial Statement - The firm's financial statement is available at your branch office, or a copy will be mailed upon written request.

Rights to your Free Credit Balance - We are permitted to use your free credit balances to conduct our business, subject to the limitations of 17C.F.R.240 15c3-3 under the Securities Exchange Act of 1934. You have the right to receive, during normal business operations, free delivery of your credit balances; any securities to which you are entitled and which have been fully paid; upon full payment of any debt to us, any securities purchased on margin.

Amount of money you can borrow - What you can borrow is not a commitment to loan funds. The amount available is typically 50% of the value of your investments held at Edward Jones. Your loan value could change daily. Your investment representative has access to daily values as well as more information on the "Amount of money you can borrow" should you wish to activate this feature. The minimum portfolio value required to be eligible for this feature is $4,000. Single, joint and business accounts are eligible.

Loan/Margin Accounts - If you have a loan or margin account, this statement covers: your general brokerage account; a special misc. account maintained for you under section 4(F)(6) of Regulation T issued by the Board of Governors of The Federal Reserve System; a separate account for securities you have sold short. The permanent record of this account is available upon request. If you have a credit balance in your loan account, the surplus amount is included with the amount shown for "cash and money market" balance.

Tax Withholding on Retirement Accounts - Federal income taxes of 10% on IRA or 20% on qualified plan distributions will be withheld unless a higher amount is elected or an IRS exception applies. State income taxes are withheld depending upon your state of residence upon distribution. Your withholding election will remain in effect until federal or state rule changes. Insufficient withholding may subjec[redacted]-tax payments to avoid penalties.

Fair Market Value Information for Individual Retirement Accounts - If you have an IRA, Roth, SEP or SIMPLE, your December 31st fair market value will be reported to the Internal Revenue Service as required by law.

Required Minimum Distributions (RMDs) - RMDs from other IRAs must be calculated separately, but the total amount may be removed from one or more of your IRAs. RMDs from qualified plans must be calculated and removed separately from each plan and cannot be part of your IRA RMD. If you turned age 70-1/2 last year, and deferred your first RMD until the current year or you have unpriced securities in this account, the RMD Summary Section is understated. Verification by a tax professional is recommended.

Transaction/Settlement Dates - Securities transactions are noted on the settlement date shown on the transaction confirmation, excepting transactions involving Edward Jones Tax-free Money Market Fund or Edward Jones Money Market Investment Shares or Retirement Shares which are listed on the trade date. Additional sections report pending trades and open orders.

Contingent Deferred Sales Charge - Shares sold on certain mutual fund classes may be subject to a contingent deferred sales charge.

Investment Objectives - Inform us promptly of any material change in your investment objectives or financial situation.

Debt Securities Transactions - For debt securities transactions, call features may exist which could affect yield; complete information will be provided upon request.

Information for Investors - Edward Jones is a member of the New York Stock Exchange and the Chicago Stock Exchange. The firm also transacts business with a variety of dealers in securities, including listed and over-the-counter stocks and bonds, government and agency issues and municipal securities. For equity securities, the firm monitors performance of competing market centers and dealers and routes orders to those that consistently guarantee execution at the national best bid or offer or better. Routed market orders generally are directed to market centers or dealers that offer opportunity for better prices through either automated or manual systems. The firm receives from certain market centers and dealers either cash payments or credits against exchange fees in return for routing orders. For agency transactions, the name of the other broker or party to the transaction will be furnished upon written request. For agency and principal transactions, the date and time of execution will be furnished upon written request. Periodically, the firm may receive other remuneration on agency trades from other sources; information will be furnished upon written request.

TERMINOLOGY

Total Estimated Value - The approximate value of the assets held at Edward Jones and outside companies at the statement date shown or date specified in the detail of Your Assets. It is estimated as the prices used to value your securities are provided by an outside service and do not always represent exact market prices. Edward Jones can't guarantee the accuracy of such values; if you need the exact price, contact your investment representative. Values for many fixed-income charges are estimates based on coupon rate and credit rating and may not represent actual transaction price. Values don't include accrued interest or dividends and for some investments don't reflect applicable charges and fees.

Your Assets Held Outside Edward Jones - Balances are provided for your information only to give an overall view of your investments with Edward Jones. SIPC coverage isn't extended to assets held outside the custody of Edward Jones. Refer to the statement received directly from these companies for details.

Tax Information for Income Distributions - Your year-end tax documents (eg. Form 1099) will provide specific classifications of your income distributions. The 2003 tax law allows Qualified (Q) dividends to be taxed at reduced rates: 15%, or 5% for individuals whose tax rates are 15% or less. Nonqualified (N) dividends are taxed at ordinary rates. Some, but not all, of Partially Qualified (P) dividends are taxed at reduced rates.

Cost Basis - Cost basis is the amount paid for a security, including commissions, reinvestments and original issue discount (OID) and adjustments for sales, principal returns, splits and spin offs. Some data may be unsubstantiated and should not be relied upon for tax preparation.

Amount Invested/Withdrawn - Amount invested reflects all purchases and other additions to your holdings, with the exception of dividend reinvestments. Amount withdrawn shows how much of your investment has been sold, redeemed or transferred. These figures should not be used for tax reporting or tax preparation.

Ratings and Recommendations - Edward Jones research opinions, Standard & Poor's and Moody's ratings may be shown for certain securities. Ratings or recommendations should not be considered an indication of future performance.

Account Activity - Entries appearing in Account Activity sections under columns headed "Where Invested" or "Sources of Funds" are additions to or subtractions from your account. For clients who have a CFO (Complete Financial Organization) account, entries indicating "Tax Free Money Market" mean Edward Jones Tax-Free Money Market Fund and entries indicating "Money Market" mean Edward Jones Money Market Investment Shares or Retirement Shares depending on the share class owned. Activity dates appearing under "Sources of Funds" correspond to the sale date of the designated Edward Jones Money Market Fund. Entries appearing under "Where Invested" will be transacted as a purchase of the previously designated Edward Jones Money Market Fund on the second business day after the date shown, with the following exceptions which will be transacted on the date indicated:

Source of Funds	Number of Days After Activity Date Shown Until Purchase of Money Market Fund
Wired Funds, SWPS Electronic Bank Transfer, Direct Deposit	1
Security Sold or Interest/Dividend Received*	0
Bond Maturities, Calls, Tendered Items *	1
Transfers from Margin Account or Money Market Fund in another Edward Jones Account	0

* For assets held within Edward Jones account

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STATEMENT OF ACCOUNT

Statement Period: 12/01/04 to 12/31/04

Last Statement: 11/30/04

December 2004	KATHERINE SIMPSON	Account Number	Financial Advisor	Telephone Numbers
		[redacted]	HONG JERRY K	208-522-3791

Research Ratings (Continued)

* This stock is currently held in one of the Piper Jaffray Guided Portfolios, which are model portfolios of stocks recommended by Private Client Research. The Guided Portfolios include the Large Capitalization Core Equities, the Dividend Income and the Small/Mid Capitalization Equities

The various independent research providers whose ratings appear on Piper Jaffray statements may have ratings systems that are different from the research ratings systems used by Piper Jaffray. This independent research and a complete description of the ratings systems used by the independent research providers selected on behalf of Piper Jaffray can be found by visiting piperjaffray.com.

Neither Piper Jaffray nor its Independent Consultant are liable for (i) the Independent Consultant's procurement decisions with respect to independent research, (ii) the independent research or its content, (iii) client transactions to the extent based upon the independent research, or (iv) claims arising from or in connection with the inclusion of independent research ratings in Piper Jaffray account statements, to the extent such claims are based on those ratings.

'Third party notification' rule taking effect in early 2005

To protect client assets from securities fraud, the NYSE and NASD are implementing new industry-wide rules on 'third party notification.' Generally, the new rules require firms to establish supervisory control policies and notification processes to monitor two main types of transaction scenarios:

- transmittals of funds or securities that would result in a change of beneficial ownership
- transmittals of funds or securities to addresses other than clients' primary address

Piper Jaffray will notify you when the transfer of money or securities in your account results in one of the above scenarios. Common examples include gifts, transfers to other banks, and checks to alternate addresses or P.O. boxes. If, when you receive the notice, you did not authorize the listed activity, you will be instructed to contact Piper Jaffray immediately.

Important reminder: When you send in checks for deposit, please make sure they are made out to PIPER JAFFRAY. Due to our spin-off from U.S. Bancorp at the end of 2003, we will no longer be able to accept checks made out to U.S. Bancorp Piper Jaffray after Dec. 31, 2004. Thank you.

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STATEMENT OF ACCOUNT

 Statement Period: 12/01/04 to 12/31/04 Last Statement: 11/30/04

December 2004 KATHERINE SIMPSON

Account Number	Financial Advisor	Telephone Numbers
[redacted]	HONG JERRY K	208-522-3791

Recap of Account

Date	Activity	Description	Quantity	Price	Amount
Account Activity					
12/03/04	CASH DIVIDEND	BOEING CO	839		167.80
12/10/04	CASH DIVIDEND	EXXON MOBIL CORP	160		43.20
12/30/04	LOAN INTEREST	INTEREST 11/29THRU 12/29 AVERAGE BALANCE 848.41 AVERAGE RATE 7.370%			5.40-

For Your Information Only

Informational Section – The following items are reported for your information only and have not been included in 'Your Portfolio' or 'Recap of Account and Money Market Fund Activity' sections. Items shown here will appear on subsequent statements in 'Recap of Account and Money Market Fund Activity' (subject to change).

Cash Dividend/Interest Payments Pending

Date	Activity	Description	Quantity	Amount
01/05/05	DIVIDEND	SKYWEST INC	100	3.00

Research Ratings

Piper Jaffray is required to provide independent research on stocks it covers in its fundamental equity research reports and in its Guided Portfolios. Similarly, Piper Jaffray is required to display both its own ratings and the ratings of one independent research provider on account statements when clients hold those securities in an account with Piper Jaffray. The ratings are the most recent available at market close on the day statements are generated. In some instances the ratings of the independent research provider may be current through the prior day's close.

Holding	Symbol	Piper Jaffray Rating	Independent Provider	Independent Rating
ORACLE CORP	ORCL	Outperform	Morningstar, Inc.	★★★
SUN MICROSYSTEMS INC	SUNW	Suspended	Morningstar, Inc.	★
VIGNETTE CORP	VIGN	Market Perform	Zacks Investment Research, Inc.	Sell
EXXON MOBIL CORP	XOM *	See Guided Portfolio	Morningstar, Inc.	★★★

[redacted]

221053 80192 4221883 0003 0004
23 76676 (N#00318789-00076676

GUIDES FOR THE JOURNEY® | PiperJaffray.

STATEMENT OF ACCOUNT

Statement Period: 12/01/04 to 12/31/04 Last Statement: 11/30/04

December 2004 KATHERINE SIMPSON

Account Number [redacted]

Financial Advisor
HONG JERRY K

Telephone Numbers
208-522-3791

Your Portfolio

Your Holdings	Symbol	Quantity	Date Acquired	Purchase Price	Purchase Cost	Market Price	Market Value	Gain or Loss	% of Holdings	Est. Current Yield %	Est. Annual Income
Stocks											
BOEING CO	BA	839	02/13/98	Please Provide		51.77	43,435.03	NA	67.0	1.93	839.00
EXXON MOBIL CORP	XOM	160	03/16/01	Please Provide		51.26	8,201.60	NA	12.6	2.09	172.00
FIBERNET TELECOM GROUP INC NEW	FTGX	166	09/18/01	6.8373	1,135	.88	146.08	-989	0.2		.00
JDS UNIPHASE CORP	JDSU	100	03/06/01	30.171	3,017	3.17	317.00	-2,700	0.5		.00
MICRON TECHNOLOGY INC	MU	600	03/16/01	Please Provide		12.35	7,410.00	NA	11.4		.00
NORTEL NETWORKS CRP NEW	NT	100	03/05/01	17.9257	1,792	3.47	347.00	-1,445	0.5		.00
ORACLE CORP	ORCL	200	03/06/01	17.8778	3,575	13.72	2,744.00	-831	4.2		.00
QWEST COMM INTL INC	Q	53	03/16/01	Please Provide		4.44	235.32	NA	0.4		.00
SKYWEST INC	SKYW	100	09/18/01	19.337	1,933	20.06	2,006.00	+73	3.1	.59	12.00
SUN MICROSYSTEMS INC	SUNW	100	03/06/01	22.6321	2,263	5.39	539.00	-1,724	0.8		.00
VIGNETTE CORP	VIGN	200	03/06/01	6.7492	1,349	1.39	278.00	-1,071	0.4		.00
WORLDCOM INC GA NEW WORLDCOM GROUP INC		223	03/16/01	Please Provide		NA	NA	NA			.00
WORLDCOM INC GEORGIA NEW MCI GROUP COM		8	03/16/01	Please Provide		NA	NA	NA			.00
	Stocks Sub-Total				**15,064**		**65,659.03**	**-8,687**	**101.3**		**1,023.00**
	Portfolio Value*				**15,064**		**65,659.03**	**-8,687**	**100.0**		**1,023.00**
MARGIN BALANCE							816.83-				
	Portfolio Net Worth*						**64,842.20**				

* Totals exclude securities without purchase cost and/or market price.

Purchase information presented in this section is gathered from sources deemed to be reliable. However, Piper Jaffray does not attest to its accuracy and is not responsible for errors and/or omissions.

[redacted]

GUIDES FOR THE JOURNEY® | PiperJaffray.

STATEMENT OF ACCOUNT

Statement Period: 12/01/04 to 12/31/04

Last Statement: 11/30/04

December 2004

KATHERINE SIMPSON
786 HOFF DR
BLACKFOOT ID 83221-1553

Account Number
[redacted]
Rep Code
FM04
Taxpayer ID
On File

Financial Advisor
HONG JERRY K
506 SOUTH WOODRUFF AVE
IDAHO FALLS ID 83401

Telephone Numbers
800-333-8794
208-522-3791

Clients of Piper Jaffray may receive independent research on stocks Piper Jaffray covers in its fundamental equity research reports and in its Guided Portfolios. Clients may access this independent research, at no cost to them, by visiting piperjaffray.com or by calling 800 747-5128.

Remember, you have until April 15, 2005 to make your IRA contribution for 2004. Make your 2005 contribution at the same time, and you'll benefit from up to 12 extra months of tax-exempt earnings growth. Call your financial advisor for assistance.

Piper Jaffray does not provide tax advice.

KATHERINE SIMPSON
786 HOFF DR
BLACKFOOT ID 83221-1553
78978-FM04

Portfolio Assets Summary

	12/01/04	12/31/04
Cash Balance	.00	.00
Money Market Funds	.00	.00
Stocks	66,052.07	65,659.03
Mutual Funds	.00	.00
Fixed Income	.00	.00
Annuities	.00	.00
Portfolio Value*	**66,052.07**	**65,659.03**
Margin Balance	1,022.43-	816.83-
Portfolio Net Worth*	**65,029.64**	**64,842.20**

** Excludes unpriced securities*

Portfolio Income Summary

	12/01/04 to 12/31/04	Year to Date
Money Market Fund	.00	.00
Dividends - Taxable	211.00	826.63
Corp./Taxable Bond Interest	.00	.00
U.S. Treasury Interest	.00	.00
Municipal Bond Interest	.00	.00
Total Portfolio Income*	**211.00**	**826.63**
Loan Interest Charges	5.40-	82.60-

** Refer to back of Statement for definitions*

[redacted]

5090

221052 80182 4221893 0003 0004
23 78978 UNF00318789-00078978

SCHEDULE IV — TRANSACTIONS

Name Michael Simpson

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.			Type of Transaction			Date	Amount of Transaction									
			PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP, DC, JT	Asset															
SP	*Example:*	Mega Corporation Common Stock	X			10–12–04		X								
	NA															

This page may be copied if more space is required.

Name Michael Simpson | Page 1 of 1

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	MBNA	credit card	X									
SP	American Express	credit card	X									
SP	First American Title Company	mortgage on rental property			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
N/A		

Use additional sheets if more space is required.

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Name Michael Simpson | Page 1 of 1

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Association for Research in Otolaryngology	Feb 22-24	Idaho Falls, Id → Daytona, Fl → Washington DC	Y	Y	N	N
	Ear, Nose, & Throat Physicians	Mar 19-22	Washington D.C. → Las Vegas, NV → Washington D.C.	Y	Y	N	N

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5093

X Original ___ Amendment

U.S. House of Representatives

MEMBER/OFFICER TRAVEL DISCLOSURE FORM

This form is for disclosing the receipt of travel expenses from private sources for meetings, speaking engagements, fact-finding trips or similar events in connection with official duties. You need not disclose government-funded or political travel on this form, or travel that is unrelated to official duties. This form does not eliminate the need to report all privately funded travel on the annual Financial Disclosure Statements of those persons required to file them. In accordance with clause 5 of House Rule 25, complete this form and file it with the Clerk of the House of Representatives, B-106 Cannon House Office Building, within 30 days after travel is completed. The Clerk is to make these forms available to the public as soon as possible after they are filed. *Obtain the dollar amounts from the sponsor; if exact dollar amounts are unavailable, provide a good faith estimate.*

Name of Member or Officer (print or type): Rep Mike Simpson (ID-02)

Name of accompanying family member (if any): _____

Relationship to Member/Officer (check one): ___ spouse ___ child

Dates of Travel: 3-19-04 – 3-22-04

Dates at personal expense: _____

Itinerary (Point of departure – destination – return): Las Vegas, NV

Sponsor (Who paid for the trip): Ear, Nose, Throat Doctors

Purpose of Trip: Speak to Doctors regarding Congressional issues in the health Care field and issues related to the Labor Health + Human Services Subcommittee

	Total Transportation Expenses	Total Lodging Expenses	Total Meal Expenses
For Member or Officer:	$37.90	$500	$210
For accompanying spouse or child:			

	Other expenses (dollar amount)	Nature of expenses (e.g., taxi, parking, registration fee, etc.)
For Member or Officer:		
For accompanying spouse or child:		

I have determined that all of the expenses listed above were necessary and that the travel was in connection with my duties as a Member or Officer of the U.S. House of Representatives and would not create the appearance that I am using public office for private gain.

SIGNATURE OF MEMBER OR OFFICER: Mike Simp DATE: 4/21/04

Version date 6/2003 by Committee on Standards of Official Conduct

X Original ____ Amendment

U.S. House of Representatives

MEMBER/OFFICER TRAVEL DISCLOSURE FORM

This form is for disclosing the receipt of travel expenses from private sources for meetings, speaking engagements, fact-finding trips or similar events in connection with official duties. You need not disclose government-funded or political travel on this form, or travel that is unrelated to official duties. This form does not eliminate the need to report all privately funded travel on the annual Financial Disclosure Statements of those persons required to file them. In accordance with clause 5 of House Rule 25, complete this form and file it with the Clerk of the House of Representatives, B-106 Cannon House Office Building, within 30 days after travel is completed. The Clerk is to make these forms available to the public as soon as possible after they are filed. *Obtain the dollar amounts from the sponsor; if exact dollar amounts are unavailable, provide a good faith estimate.*

Name of Member or Officer (print or type): Rep. Mike Simpson (ID-02)

Name of accompanying family member (if any): _____

Relationship to Member/Officer (check one): ____ spouse ____ child

Dates of Travel: Feb 22 - 24, 2004

Dates at personal expense: _____

Itinerary (Point of departure – destination – return): IDAHO FALLS, ID → DAYTONA, FL → WASH, DC.

Sponsor (Who paid for the trip): Association For Research in Otolaryngology

Purpose of Trip: To speak to physicians dedicated to research and funding for ear-nose-throat related disorders.

	Total Transportation Expenses	Total Lodging Expenses	Total Meal Expenses
For Member or Officer:	$1,196	$292.00	$92.00
For accompanying spouse or child:			

	Other expenses (dollar amount)	Nature of expenses (e.g., taxi, parking, registration fee, etc.)
For Member or Officer:		
For accompanying spouse or child:		

I have determined that all of the expenses listed above were necessary and that the travel was in connection with my duties as a Member or Officer of the U.S. House of Representatives and would not create the appearance that I am using public office for private gain.

SIGNATURE OF MEMBER OR OFFICER: _____ DATE: _____

Version date 6/2003 by Committee on Standards of Official Conduct

Name Michael Simpson	Page 1 of 1

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
NA	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
NA		

GPO 2005 96-729 (mac)

Use additional sheets if more space is required.

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER

2005 MAY 16 PM 2:37

MC

(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

Ike N. Skelton
(Full Name)

2206 Rayburn HOB Washington, DC 20515
(Mailing Address)

202.225.2876
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives	State: MO District: 04	☐ Officer Or Employee — Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Ike Skelton	5-16-05

5097

SCHEDULE I - EARNED INCOME

Name Ike N. Skelton

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Missouri State Senate - Retirement	State Senate - 6 years	$7,669

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Ike N. Skelton

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
SP	Trust, Virginia B. Anding Estate, United Missouri Bank, Kansas City, MO Asset: UMB Common Stock fund, UMB Taxable Fixed Income Fund	$250,001 - $500,000	DIVIDENDS/INTEREST	$2,501 - $5,000	
	Trust, Carolyn B. Skelton Estate, Commerce Bank, Kansas City, MO Assets: CB Tax Free Bond Funds, CB Institutional Liquid Assets Tax Exempt	$100,001 - $250,000	DIVIDENDS/INTEREST	$2,501 - $5,000	
SP	McGowan Working Partners	$1 - $1,000	RENT	$1 - $200	
SP	Fractional Interest in Store Building, Delhi, LA	None		NONE	donated

SCHEDULE IV - TRANSACTIONS

Name Ike N. Skelton

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	Fractional Interest in Store Building, Delhi, LA	Other	donated 12/2004	$1,001 - $15,000

SCHEDULE V - LIABILITIES

Name Ike N. Skelton

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Congressional Federal Credit Union, Washington, DC	Personal Loan	$10,001 - $15,000
	Lafayette Co. Bank, Lexington, MO	Open Note	$15,001 - $50,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Ike N. Skelton

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
BAE Systems, Arlington, VA	July.12	Wash, DC - Johnson City, NY - Washington, DC	N	Y	N	n/a
Missouri Order of the World Wars, Kansas City, MO	Aug. 20	Kansas City, MO - Kansas City, MO - NO TRANSPORTATION	Y	Y	N	n/a
Air Force Sergeants Association, Columbus, OH	Aug. 24	Kansas City, MO - Columbus,OH - Kansas City, MO	N	Y	N	n/a

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
2005 MAY -3 PM 2:32
9
CLERK
U.S. HOUSE OF REPRESENTATIVES

LOUISE M. SLAUGHTER
(Full Name)

14 MANOR HILL DR., FAIRPORT, NY 14450
(Mailing Address)

Daytime Telephone
585-723-7519

MC HAND DELIVERED
(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State: NY District: 28	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [ ]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		

5103

Name LOUISE M SLAUGHTER | Page 1 of 1

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2004	$2,000
XYZ Magazine	Article	Aug. 13, 2004	$500

This page may be copied if more space is required.

Name LOUISE M SLAUGHTER | Page 1 of 1

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	NEW YORK STATE	LEGISLATIVE PENSION	8,298

For payments to charity in lieu of honoraria, use Schedule II.

5105

Name LOUISE M. SLAUGHTER | Page 1 of 2

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset (A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000)	Block C: Type of Income (DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income))	Block D: Amount of Income (I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000)	Block E: Transaction (P, S, E)
SP	Mega Corp Stock	F	DIVIDENDS	IV	P
DC	Simon & Schuster	Indefinite	Other: Royalties	IX	
JT	1st Bank of Paducah, KY accounts	F	INTEREST	VI	
	QUALIFIED RETIREMENT ACCTS				
	Fidelity Growth + Inc Fund	C	DIVIDENDS; INTEREST	III	
	Fidelity Independence Fund	C	DIVIDENDS; INTEREST	V	
	Vanguard Growth + Inc Fund	D	DIVIDENDS; INTEREST	IV	
SP	401K Eastman Kodak	G	INTEREST	VI	
SP	Fidelity Growth + Inc Fund	G	DIVIDENDS; INTEREST	I	

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name LOUISE M SLAUGHTER

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	Mutual Qualified Fund Cl-Z							X						X		X											X					
SP	Fidelity Growth Co Fund						X							X		X										X						
SP	Fidelity Independence Fund				X									X		X									X							
SP	Fidelity Magellan Fund					X								X		X									X							
JT	Citigroup				X									X										X								
JT	Oppenheimer Growth Fund A				X									X		X					X											
JT	Fidelity Daily Income Trust						X									X								X								
JT	Eastman Savings Loan		X													X						X										
	Clorox			X										X								X										
	Proctor + Gamble						X							X											X							
	JM Smucker			X													X					X										

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SCHEDULE IV — TRANSACTIONS

Name LOUISE M SLAUGHTER | Page 1 of 1

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-04		X								
	IRA MINIMUM REQUIRED DISTRIBUTIONS														
	Vanguard Growth + Income Fund		X		12-14-04	X									
SP	Fidelity Growth + Income Fund		X		12-13-04		X								
SP	Fidelity Growth Company Fund		X		12-13-04	X									
SP	401k Eastman Kodak		X		12-9-04		X								

This page may be copied if more space is required.

Name	Page ___ of ___

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

Name	Page ___ of ___

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days

Name	Page ___ of ___

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2005 99–729 (mac)

Use additional sheets if more space is required.

COMMITTEE ON RULES
RANKING MEMBER

WASHINGTON OFFICE:
2469 RAYBURN BUILDING
WASHINGTON, D.C. 20515-3221
(202) 225-3615

DISTRICT OFFICES:

3120 FEDERAL BUILDING
100 STATE STREET
ROCHESTER, NY 14614
(585) 232-4850

485 MAIN STREET, SUITE 105
BUFFALO, NY 14203
(716) 853-5813

1910 PINE AVENUE
NIAGARA FALLS, NY 14301
(716) 282-1274

WEBSITE: http://www.louise.house.gov

LOUISE M. SLAUGHTER
CONGRESS OF THE UNITED STATES
28TH DISTRICT, NEW YORK

2

May 10, 2005

MC

Clerk of the House
Legislative Resource Center
B-106 Cannon CHOB
Washington DC 20515

Dear Mr. Trandahl,

Enclosed please find an amended Schedule VII, to be attached to my Calendar Year 2004 Financial Disclosure Statement. Thank you for your assistance.

Sincerely,

HAND DELIVERED

Louise

Louise M. Slaughter
Member of Congress

LEGISLATIVE RESOURCE CENTER
2005 MAY 10 AM 11:31
U.S. HOUSE OF REPRESENTATIVES

PRINTED ON RECYCLED PAPER

Name Rep Louise Slaughter | Page ___ of ___

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C —Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	American Railroad Association	Nov 7-10	Roch NY - Palm Beach FL - Roch NY	Y	Y	Y	N
	Free Press Media	May 27-31	Roch NY - New Orleans - Wash DC/ Roch NY	Y	Y	Y (lodging only)	N
	UAW	April 27	Atlantic City NJ (no reimbursement)	Y	Y	N	N

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2005 MAY 10 AM 11:52
U.S. HOUSE OF REPRESENTATIVES

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
2005 MAY -5 AM 10: 24
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED
MC (Office Use Only)

Adam Smith
(Full Name)
227 Cannon House Office Bldg.
(Mailing Address)
Washington, DC 20515
Daytime Telephone: (202) 225-8901

Filer Status	☒ Member of the U.S. House of Representatives	State: Washington District: 9th	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐	No ☒	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☒	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		

5114

Name	Page ___ of ___

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name	Page ___ of ___

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash. D.C.	Speech	Feb. 2, 2004	$2,000
XYZ Magazine	Article	Aug. 13, 2004	$500

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT). In the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset												Block C: Type of Income							Block D: Amount of Income											Block E: Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other: Type of Income (Specify. For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:* SP Mega Corp. Stock					X								X										X								P
	DC Simon & Schuster			Indefinite																Royalties									X			
	JT 1st Bank of Paducah, KY accounts						X									X										X						
JT	Wash Mutual Checking			X																	X											
JT	Wash Mutual checking				X											X							X									
S	Wash St Retirement			X																	X											
SP	Wash. St. Retirement		X																		X											
JT	F5 Networks Stock			X																	X											
SP	IRA - IBM Stock			X										X								X										

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Adam Smith

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
SP	IRA- Calamos Growth Fund B	C		I	P
JT	Smith Barney Fund. B	D		I	P
JT	Calamos Growth Fund B	C	CAPITAL GAINS	II	P
JT	Federated Kaufmann Fund B	C	CAPITAL GAINS	III	P
JT	Van Kampen Equity & Income B	D	DIVIDENDS	III	P
JT	Vanguard Index Fund	D	DIVIDENDS	III	P
JT	T. Rowe Price	A	DIVIDENDS; CAPITAL GAINS	II	S
JT	Van Kampen Emerging Growth B	A	CAPITAL GAINS	II	S
DC	GET Account	D		I	
DC	GET Account	D		I	

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SCHEDULE IV — TRANSACTIONS

Name Adam Smith

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–04		X								
JT	Calamos Growth Fund B	X			11-22-04 5-20-04	X									
SP	IRA - Calamos Growth Fund B	X			11-26-04	X									
JT	Federated Kaufmann Fund B	X			11-18-04 5-20-04	X									
JT	Smith Barney Fundamental B	X			1/15/04, 2/15/04 3/15/04, 4/15/04	X									
JT	Van Kampen Emerging Growth B		X		4-22-04	X									
JT	Van Kampen Equity and Income Fund B	X			4-22-04 and 12 other dates		X								
JT	Vanguard Index Fund	X			3/24/04, 6/25/04 9/24/04, 12/24/04	X									
JT	T. Rowe Price Fund	X	X		8-5 dates Sold - 8/5/04		X								

This page may be copied if more space is required.

Name	Page ___ of ___

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Global Partnerships	Jan. 11-15	Seattle - Honduras - Seattle	Y	Y	N	N
	DLC	Mar. 25-28	Wash. DC - Amelia Island FL - DC	Y	Y	N	N
	Aspen Institute	Jun. 27-July 2	Wash DC - Lausanne, Switz - Portland OR	Y	Y	Y	N
	Aspen Institute / DLC	Dec. 2-5	Seattle - Aspen, CO - Seattle	Y	Y	Y	N

Name	Page of ___

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2005 98-729 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2005 MAY -5 PM 5:01
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only)
MC

Adam Smith
(Full Name)
227 Cannon House Office Bldg.
Washington, DC 20515
(Mailing Address)
Daytime Telephone: (202) 225-8901

Filer Status	[X] Member of the U.S. House of Representatives — State: Washington 9th District:	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Adam Smith	05/5/05

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UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

ATIVE RESOURCE CENTER
2005 MAY 16 PM 4:57
(Office Use Only) MC

Christopher H. Smith
(Full Name)

107 Nottinghill Lane Hamilton, NJ 08619
(Mailing Address)

202-225-3765
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives — State: NJ District: 04	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15) ☐ Amendment	☐ Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☑ No ☐	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Christopher H. Smith	5/16/05

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SCHEDULE I - EARNED INCOME

Name Christopher H. Smith

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Feminists for Life of America	Spouse Salary	n/a

SCHEDULE II - PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

Name Christopher H. Smith

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Knights of Columbus, Trenton, NJ Council	Speech	Feb. 28, 2004	$400

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Christopher H. Smith

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	Aquinas Market Funds P.O. Box 219533 Kansas City, MO 614121-9533	$142,441	DIVIDENDS	$1,399	Other
DC	Aquinas Money Market Fund	$8,076	DIVIDENDS	$74	Other
DC	Aquinas Money Market Fund	$28,268	DIVIDENDS	$261	
DC	Aquinas Money Market Funds	$21,201	DIVIDENDS	$195	
	Vanguard Money Market Fund (IRA) Inherited	$47,695	DIVIDENDS	$503	S, P

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SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Christopher H. Smith

	Vanguard International Growth Inherited (IRA)	$0	CAPITAL GAINS	$644	E, P, S
	Vanguard Money Market Fund (IRA) Inherited	$0	Distribution	$2,000	S
JT	Congressional Federal Credit Union	$1,001 - $15,000	INTEREST	$11	
DC	Certificate of Accrual on Treasury Securities	$0	INTEREST	$527	S

SCHEDULE IV - TRANSACTIONS

Name Christopher H. Smith

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
JT	Aquinas Money Market Funds (Withdrawal)	Other	2-17-04	$6,000
JT	Aquinas Money Market Funds (Withdrawal)	Other	5-17-04	$3,000
JT	Aquinas Money Market Funds (Withdrawal)	Other	11-12-04	$10,000
	Vanguard Money Market Inherited (IRA) DISTRIBUTION	Other	12-20-04	$2,000
	Vanguard Money Market Inherited (IRA)	E	11-04-04	$25,000
	Vanguard International Growth Inherited (IRA)	P	11-04-04	$25,000
	Vanguard International Growth Inherited (IRA)	S	11-30-04	$9,800
	Vanguard Money Market Inherited (IRA)	E	11-30-04	$9,800
	Vanguard International Growth Inherited (IRA)	S	12-07-04	$15,844
	Vanguard Money Market Inherited (IRA)	E	12-07-04	$15,844
DC	Certificate of Accrual on Treasury Securites	S	05-28-04	$12,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Christopher H. Smith

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Fellowship of Catholic Scholars	Sept. 24-25	Dulles, VA to Pittsburgh, PA	Y	Y	Y	N/A

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Christopher H. Smith

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Fellowship of Catholic Scholars	Sept. 24-25	Dulles, VA --Pittsburgh,PA -- Dulles, VA	Y	Y	Y	N/A

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2005 JUN 14 PM 4:57

U.S. HOUSE OF REPRESENTATIVES

MC

(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

Lamar Smith
(Full Name)

2184 Rayburn House Office Building 202-225-4236
(Mailing Address) Daytime Telephone:

Filer Status	[X] Member of the U.S. House of Representatives — State: TX District: 21	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Lamar Smith	6/14/05

FIN 2004.max

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Name	Lamar Smith	Page 2 of 9

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Christian Science Practitioner	earnings	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name	Lamar Smith	Page _3_ of _9_

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
	XYZ Magazine	Article	Aug. 13, 2003	$500
	NA			

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name Lamar Smith

Page 4 of 9

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset (A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000)	Block C: Type of Income (DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income))	Block D: Amount of Income (I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000)	Block E: Transaction (P, S, E)
SP, DC, JT	*Examples:* SP Mega Corp. Stock		DIVIDENDS X	III X	P
	Simon & Schuster	Indefinite	Royalties		
	1st Bank of Paducah, KY accounts		INTEREST X	VI X	
	Life Tenant, undivided (25%) surface and mineral interest of Lamar Seeligson Ranch, Premont, TX	H X	DIVIDENDS X; royalties	VIII X; IX X	

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Lamar Smith

Page 5 of 9

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1,000 or less	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENTS, ROYALTIES	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Frost Bank				X											X							X									
	Wright Patman Federal Credit Union							X								X								X								
	19 Warren Street Barnstable, MA							X						X											X							

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SCHEDULE IV — TRANSACTIONS

Name Lamar Smith

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
	Bank of America (see attached documents														
	for individual transactions for each account)														
	account number W12-020869		X			X									
	account number 139-0805412		X			X									
	account number 139-08053-13		X			X									
	account number 139-07978-17		X				X								

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

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Name Lamar Smith | Page 7 of 9

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	NA											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
NA		

Use additional sheets if more space is required.

Name Lamar Smith | Page 8 of 9

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	NA						

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Name	Lamar Smith	Page 9 of 9

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
NA	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NA	

Use additional sheets if more space is required

[redacted]

BANC OF AMERICA
INVESTMENT SERVICES INC
900 WEST TRADE STREET
NC1-026-05-01
CHARLOTTE, NC 28255

Account Number: [redacted]

Banc of America Investment Services, Inc.™

LAMAR SMITH
419 EAST HATHAWAY
SAN ANTONIO TX 78209

FINANCIAL ADVISOR
HARRY FILSON
RJF: 4RS

FOR QUESTIONS OR UP-TO-DATE ACCOUNT INFORMATION:

Financial Advisor	703 761 8154
Supervisory Office	800 468 7301
Call Center	800 832 2272

Investment products provided by Banc of America Investment Services, Inc.:

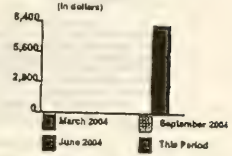
ARE NOT FDIC INSURED	MAY LOSE VALUE	ARE NOT BANK GUARANTEED

Banc of America Investment Services, Inc. is a registered broker-dealer, member NASD and SIPC and a nonbank subsidiary of Bank of America, N.A.

Statement Date: 12/01/04 to 12/31/04

SNAPSHOT

TOTAL PORTFOLIO
$8,217.22



A portfolio value less than $100.00 may not be displayed.

[redacted]		
Cash and Cash Equivalents	$3,717.22	($4,254.20)
Securities	$4,500.00	$12,560.00
TOTAL PORTFOLIO VALUE	$8,217.22	$8,305.80

[redacted]		
Net Trading	$7,967.31	($5,687.59)
Net Core Fund Activity	($3,717.22)	$5,674.69
Net Income and Expenses	$4.11	$13.00

LEGEND
() Numbers in parentheses are debits or subtractions
NFS = National Financial Services LLC

Account carried with National Financial Services LLC, Member NYSE, SIPC

Account Number: [redacted]
Account Name: SMITH L

Statement Date: 12/01/2004 to 12/31/2004

Banc of America
Investment Services, Inc.™

SUMMARY

ALERT: Taxable income is determined based on information available to NFS at the time the statement was prepared, and is subject to change. Final information on taxable of interest and dividends is available on Form 1099-Div, which is mailed in January of the subsequent year.

PORTFOLIO VALUE	Beginning Balance	Ending Balance
Cash and Cash Equivalents		
Cash	$0.00	($4,254.20)
Money Markets	$3,717.22	$0.00
Securities		
Equities		
Equity	$4,500.00	$12,560.00
Total Securities	$4,500.00	$12,560.00
TOTAL PORTFOLIO VALUE	$8,217.22	$8,305.80

ACCOUNT ACTIVITY	Beginning Balance	Ending Balance
BEGINNING BALANCE	($4,254.20)	
Trading		
Securities Purchased	$0.00	($13,655.00)
Securities Sold	$7,967.31	$7,967.31
NET TRADING	$7,967.31	($5,687.69)
Core Fund Activity		
Core Funds Purchased	($3,717.22)	($3,718.28)
Core Funds Sold	$0.00	$9,392.97
NET CORE FUND ACTIVITY	($3,717.22)	$5,674.69
Income and Expenses		
Taxable Income		
Taxable Dividends	$4.11	$13.00
NET TAXABLE INCOME	$4.11	$13.00
TOTAL INCOME	$4.11	$13.00
NET INCOME AND EXPENSES	$4.11	$13.00
ENDING BALANCE	$0.00	

PORTFOLIO ALLOCATION

Money Markets	45.24%
Equity	54.76%

Allocations for equities, fixed income, and other categories may include mutual funds and may be net of short positions. NFS has made assumptions concerning how certain mutual funds are allocated. Closed-end mutual funds listed on an exchange may be included in the equity allocation. The chart may not reflect your actual portfolio allocation. Consult your broker/dealer prior to making investment decisions.

DETAIL

PORTFOLIO VALUE

See last page for important information about your brokerage account and this statement.

Account carried with National Financial Services LLC, Member NYSE, SIPC

Account Number: [redacted]
Account Name: SMITH L

Statement Date: 12/01/2004 to 12/31/2004

Banc of America Investment Services, Inc.™

Mutual Funds, Annuities, and other investment products are not insured by the FDIC or any other government agency, are not deposits or obligations of, or guaranteed by, Banc of America Investment Services or any affiliate, and are subject to investment risks, including possible loss of principal invested.

CASH AND CASH EQUIVALENTS 45.24%

Description	Symbol/Cusip Account Type	Quantity	Price on 12/31/04	Current Market Value	Prior Market Value	Estimated Annual Income
Money Markets						
NATIONS CASH RESERVES DAILY 7 DAY AVG NET YIELD 1.46% Estimated Yield 0.59% Dividend Option Reinvest Capital Gain Option Reinvest	NCRDX CASH	3,717.22	$1.00	$3,717.22	unavailable	$20.73
Total Cash and Cash Equivalents				$3,717.22		$20.73

EQUITIES 54.76%

Description	Symbol/Cusip Account Type	Quantity	Price on 12/31/04	Current Market Value	Prior Market Value	Estimated Annual Income
Equity						
STAR GAS PARTNER SEN SUB NOTES L P	SGH CASH	1,000	$4.50	$4,500.00	$4,480.00	
Total Equities				$4,500.00		
Total Securities				$4,500.00		
TOTAL PORTFOLIO VALUE				$8,217.22		$20.73

[redacted]

TRADING

Account carried with National Financial Services LLC, Member NYSE, SIPC

Account Number: [redacted]
Account Name: SMITH L
Statement Date: 12/01/2004 to 12/31/2004

Banc of America
Investment Services, Inc.™

Securities Sold

Settlement Date	Account Type	Transaction	Description	Quantity	Amount
12/01/04	CASH	YOU SOLD	HORNBECK OFFSHORE SVCS INC NEW @ 20	(400)	$7,947.31
Net Securities Sold					$7,947.31
NET TRADING					$7,947.31

CORE FUND ACTIVITY
Core Funds Purchased

Settlement Date	Account Type	Transaction	Description	Quantity	Amount
12/01/04	CASH	YOU BOUGHT	NATIONS CASH RESERVES DAILY @ 1	3,713.11	($3,713.11)
12/30/04	CASH	REINVESTMENT	NATIONS CASH RESERVES DAILY NET DIV REINVEST	4.11	($4.11)
Net Core Funds Purchased					($3,717.22)
NET CORE FUND ACTIVITY					($3,717.22)

INCOME AND EXPENSES
Taxable Income

Date	Account Type	Transaction	Description	Quantity	Amount
Taxable Dividends					
12/30/04	CASH	DIVIDEND RECEIVED	NATIONS CASH RESERVES DAILY DIVIDEND RECEIVED		$4.11
Net Taxable Income					$4.11
Total Income					$4.11
NET INCOME AND EXPENSES					$4.11

Account carried with National Financial Services LLC, Member NYSE, SIPC

Account Number: [redacted]
Account Name: SMITH L
Statement Date: 12/01/2004 to 12/31/2004

Banc of America
Investment Services, Inc.™

[redacted]

Make retirement planning a New Year's resolution. One important financial planning move you can make this year is to focus on your IRA. Start now by making your 2005 contributions to a Roth IRA or Traditional IRA – and get yourself off to a good start toward your goals. Contact your Financial Advisor or call 1.800.822.2222 to learn more.

Account carried with National Financial Services LLC, Member NYSE, SIPC

INDIVIDUAL ACCOUNT

Qpartner

December 1, 2004 - December 31, 2004

ACCOUNT NUMBER [redacted]

LAMAR SMITH
LE ACCT
MANAGED ASSETS PROGRAM-OFI

Your Financial Consultant
HARRY PILSON
(703) 564-0775

Banc of America Investment Services, Inc.®

17757 US HIGHWAY 19 NORTH
BUILDING TWO, SUITE 300
CLEARWATER, FL 33764
TEL: (727)532-6975
1-800-282-8929 (NATIONWIDE)

#BWNFQNP
#139HCHGL12PP2#

LAMAR SMITH
LE ACCT
MANAGED ASSETS PROGRAM-OFI
1211 SUMMIT ROAD
MC LEAN VA 22101-2838

ACCOUNT SUMMARY

	OPENING BALANCE	CLOSING BALANCE
NET ACCOUNT BALANCE	$0.00	$0.00
Money Market funds	26,665.95	26,873.66
Securities	122,682.00	126,317.70
TOTAL PRICED PORTFOLIO	149,347.95	153,191.36
Total Portfolio Equity	$149,347.95	$153,191.36

PORTFOLIO EQUITY ALLOCATION

INCOME AND EXPENSE SUMMARY

	THIS PERIOD	YEAR TO DATE
Taxable dividends	$289.45	$533.56
Taxable money market div	0.00	42.22

SIPC

See Reverse Side For Important Tax Information. This statement shall be conclusive if not objected to in writing within ten days. Errors and omissions excepted. Please address all communications to the firm and not to individuals. Address changes or other material changes on your account should be directed to the office servicing your account. Kindly mention your account number. This statement should be retained for income tax purposes.

Account Carried by,
ADP Clearing & Outsourcing Services, Inc.
Member New York Stock Exchange, Inc
14 Broadway, New York, NY 10004-1798

NOT FDIC INSURED
No Bank guarantee
May lose value

5146

INDIVIDUAL ACCOUNT

partner

December 1, 2004 - December 31, 2004

ACCOUNT NUMBER [redacted]

LAMAR SMITH
LE ACCT
MANAGED ASSETS PROGRAM-OFI

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17757 US HIGHWAY 19 NORTH
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CLEARWATER, FL 33764
TEL: (727)532-5975
1-800-282-8929 (NATIONWIDE)

▶ ADP CLEARING & OUTSOURCING SERVICES, INC. (ADP CLEARING), FORMERLY KNOWN AS FLEET SECURITIES, INC., NET CAPITAL AT 10-31-04 WAS $240 MIL, EXCEEDING RQRMTS BY $220 MIL. ADP CLEARING'S AUDITED BALANCE SHEET MAY BE OBTAINED BY ACCESSING WWW.USCLEARING.COM/ABOUT_US.HTM, OR BY CALLING ADP CLEARING'S TOLL-FREE NUMBER AT 1-800-354-7429.

▶ CAPITAL GAINS SUMMARY

The cost basis information displayed in your statement has been provided by you, your Registered Representative, or our transaction files and is used to determine your gains and losses. Unrealized gains or losses is an estimated figure and should not be used for tax preparation. Securities for which you have not provided us a cost basis or for which we do not have a current price are not included in this summary. We suggest you review all cost basis details for accuracy and completeness and contact your Registered Representative if you need to amend the information shown on this statement.

	THIS PERIOD	YEAR TO DATE		THIS PERIOD
REALIZED			UNREALIZED	
Short-term gain/(loss)	N/A	N/A	Short-term gain/(loss)	$8,503.96
Long-term gain/(loss)	N/A	N/A	Long-term gain/(loss)	N/A
Net realized gain/(loss)	**N/A**	**N/A**	**Net unrealized gain/(loss)**	**$8,503.96**

N/A-Information was not available and is not reflected in the gain/(loss) summary

▶ PORTFOLIO SUMMARY

DESCRIPTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED	CURRENT PRICE	COST BASIS	CURRENT MARKET VALUE	UNREALIZED GAIN/ (LOSS)	EST. ANNUAL INCOME	% OF TOTAL PORTFOLIO
MONEY MARKET FUNDS									
GALAXY FUNDS PRIME RESERVES FUND Estimated Yield 1.06%	GPRXX	26,873.66	VARIOUS	$1.00	$26,873.66	$26,873.66	N/A	$290	17.543%
Total Money Market Funds					**$26,873.66**	**$26,873.66**		**$290**	**17.543%**
EQUITIES / OPTIONS									
ALCOA INC	AA	100	MISSING	$31.42	MISSING	$3,142.00	Δ	$106	2.049%

Δ Gain/Loss not computed because cost basis and/or date acquired is missing.

INDIVIDUAL ACCOUNT

Qpartner

December 1, 2004 - December 31, 2004

ACCOUNT NUMBER [redacted]

Banc of America Investment Services, Inc.®

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LE ACCT
MANAGED ASSETS PROGRAM-OFI

▶ PORTFOLIO SUMMARY (CONTINUED)

DESCRIPTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED	CURRENT PRICE	COST BASIS	CURRENT MARKET VALUE	UNREALIZED GAIN/ (LOSS)	EST. ANNUAL INCOME	% OF TOTAL PORTFOLIO
EQUITIES / OPTIONS (continued)									
ALCOA INC		75	09/30/04	31.42	2,515.50	2,356.50	(159.00)		
		175			2,515.50	5,496.50	Δ		
ABBOTT LABORATORIES	ABT	135	09/30/04	46.85	5,721.30	6,297.75	576.45	140	4.111%
ALLSTATE CORP	ALL	120	09/30/04	51.72	5,737.20	6,206.40	469.20	134	4.051%
COMCAST CORP NEW CL A	CMCSA	200	09/30/04	33.26	5,964.00	6,656.00	692.00		4.345%
CONOCOPHILLIPS	COP	70	09/30/04	96.53	5,785.50	6,078.10	292.60	140	3.968%
CHUBB CORP WITH RIGHTS TO PURCHASE PREFRD STK UNDER CERTAIN CIRCUMSTANCE	CB	80	09/30/04	76.90	5,888.00	6,152.00	664.00	128	4.016%
CONAGRA FOODS INC WITH RIGHTS TO PURCHASE COMMON STK UNDER CERTAIN CIRCUMSTANCE	CAG	220	09/30/04	28.45	5,680.40	6,479.00	798.60	240	4.229%
DELPHI CORP (FORMERLY DELPHI AUTOMOTIVE SYSTEMS CORP)	DPH	620	09/30/04	9.02	5,728.80	5,592.40	(136.40)	174	3.651%
DOW JONES & CO INC	DJ	140	09/30/04	43.08	6,681.20	6,028.40	347.20	140	3.935%
EXELON CORP	EXC	156	09/30/04	44.07	5,657.50	6,830.85	1,173.35	248	4.459%

Δ Gain/Loss not computed because cost basis and/or date acquired is missing

INDIVIDUAL ACCOUNT

Qpartner

December 1, 2004 - December 31, 2004

ACCOUNT NUMBER [redacted]

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LAMAR SMITH
LE ACCT
MANAGED ASSETS PROGRAM-OFI

▶ PORTFOLIO SUMMARY (CONTINUED)

DESCRIPTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED	CURRENT PRICE	COST BASIS	CURRENT MARKET VALUE	UNREALIZED GAIN/ (LOSS)	EST ANNUAL INCOME	% OF TOTAL PORTFOLIO
EQUITIES / OPTIONS (continued)									
GENWORTH FINANCIAL INC COM CL A	GNW	250	09/30/04	27.00	5,887.50	6,750.00	862.50	65	4.406%
INTEL CORP	INTC	175	MISSING	23.39	MISSING	4,093.25	Δ	91	4.352%
		110	09/30/04	23.38	2,200.99	2,572.90	371.91		
		285			2,200.99	6,666.15	Δ		
JOHNSON & JOHNSON	JNJ	100	MISSING	63.42	MISSING	6,342.00	Δ	114	4.140%
J C PENNEY CO INC	JCP	160	MISSING	41.40	MISSING	6,624.00	Δ	60	4.324%
REGIONS FINANCIAL CORP NEW	RF	170	09/30/04	35.59	5,601.50	6,050.30	448.80	227	3.950%
SOUTHWEST AIRLINES CO WITH RIGHTS TO PURCHASE COMMON STK UNDER CERTAIN CIRCUMSTANCE	LUV	415	09/30/04	16.28	6,639.85	6,756.20	1,116.35	7	4.410%
US BANCORP DEL COM NEW	USB	200	09/30/04	31.32	5,780.00	6,264.00	504.00	240	4.089%
VERIZON COMMUNICATIONS	VZ	145	09/30/04	40.51	5,699.86	5,873.86	174.00	223	3.834%
WELLS FARGO & CO	WFC	120	MISSING	62.15	MISSING	7,458.00	Δ	230	4.868%
WEYERHAEUSER CO WITH RIGHTS TO PURCHASE PREFRD STK UNDER CERTAIN CIRCUMSTANCE	WY	85	09/30/04	67.22	5,625.30	5,713.70	88.40	136	3.730%
Total Equities					**$90,154.49**	**$126,317.70**	**$8,503.96**	**$2,859**	**82.457%**

Δ Gain/Loss not computed because cost basis and/or date acquired is missing.

INDIVIDUAL ACCOUNT

Qpartner

December 1, 2004 - December 31, 2004

ACCOUNT NUMBER [redacted]

Banc of America Investment Services, Inc.®

17757 US HIGHWAY 19 NORTH
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LAMAR SMITH
LE ACCT
MANAGED ASSETS PROGRAM-OFI

▶ PORTFOLIO SUMMARY (CONTINUED)

DESCRIPTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED	CURRENT PRICE	COST BASIS	CURRENT MARKET VALUE	UNREALIZED GAIN/ (LOSS)	EST. ANNUAL INCOME	% OF TOTAL PORTFOLIO
TOTAL PRICED PORTFOLIO						**$153,191.36**		**$3,149**	

▶ ACCOUNT ACTIVITY

TRANSACTION	DATE	ACCOUNT TYPE	DESCRIPTION	QUANTITY	PRICE	DEBIT	CREDIT
DIVIDENDS AND INTEREST							
DIVIDEND	12/01/04	C	CONOCOPHILLIPS CASH DIV ON 70 SHS REC 10/28/04 PAY 12/01/04		$.50		$35.00
DIVIDEND	12/01/04	C	CONAGRA FOODS INC CASH DIV ON 220 SHS REC 11/01/04 PAY 12/01/04		.2725		59.95
DIVIDEND	12/01/04	C	DOW JONES & CO INC CASH DIV ON 140 SHS REC 11/01/04 PAY 12/01/04		.25		35.00
DIVIDEND	12/01/04	C	INTEL CORP CASH DIV ON 285 SHS REC 11/07/04 PAY 12/01/04		.04		11.40
DIVIDEND	12/01/04	C	WELLS FARGO & CO CASH DIV ON 120 SHS REC 11/05/04 PAY 12/01/04		.48		57.60
DIVIDEND	12/07/04	C	JOHNSON & JOHNSON CASH DIV ON 100 SHS REC 11/16/04 PAY 12/07/04		.285		28.50

INDIVIDUAL ACCOUNT

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December 1, 2004 - December 31, 2004

ACCOUNT NUMBER [redacted]

Banc of America Investment Services, Inc.®

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ACCOUNT ACTIVITY (CONTINUED)

TRANSACTION	DATE	ACCOUNT TYPE	DESCRIPTION	QUANTITY	PRICE	DEBIT	CREDIT
DIVIDENDS AND INTEREST			(continued)				
DIVIDEND	12/10/04	C	EXELON CORP CASH DIV ON 168 SHS REC 11/15/04 PAY 12/10/04		.40		62.00
Total Dividends and Interest							$289.45
MISCELLANEOUS TRANSACTIONS							
JOURNAL	12/01/04	C	MAP FEES 3QTR			$81.74	
JOURNAL	12/02/04	C	MAP FEES 3QTR			81.74	
JOURNAL	12/07/04	C	REV MAP FEES 3Q				81.74
Total Miscellaneous Transactions						$163.48	$81.74

MONEY MARKET ACTIVITY

DATE	ACTIVITY	DESCRIPTION	TRANSACTION AMOUNT IN SHARES	DEBIT	CREDIT	BALANCE IN SHARES
GALAXY FUNDS						
	Opening Balance	**(Shares valued @ 1.00)**				**26,665.95**
12/02/04	SWEEP	GALAXY FUNDS PRIME RESERVES FUND FROM CASH ACCOUNT BALANCE	117.21	117.21		26,783.16
12/03/04	SWEEP	GALAXY FUNDS PRIME RESERVES FUND EXPEDITED REDEMPTION	-81.74		81.74	26,701.42

INDIVIDUAL ACCOUNT

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December 1, 2004 - December 31, 2004

ACCOUNT NUMBER [redacted]

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▶ MONEY MARKET ACTIVITY (CONTINUED)

DATE	ACTIVITY	DESCRIPTION	TRANSACTION AMOUNT IN SHARES	DEBIT	CREDIT	BALANCE IN SHARES
GALAXY FUNDS	(continued)					
12/08/04	SWEEP	GALAXY FUNDS PRIME RESERVES FUND FROM CASH ACCOUNT BALANCE	110.24	110.24		26,811.66
12/13/04	SWEEP	GALAXY FUNDS PRIME RESERVES FUND FROM CASH ACCOUNT BALANCE	62.00	62.00		26,873.66
	Closing Balance	**(Shares valued @ 1.00)**				**26,873.66**

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REQUEST FOR MISSING COST INFORMATION

For your convenience, this page lists any open securities positions for which we do not have cost basis information. An open position is a security that you have purchased or sold short but have not yet realized a gain or loss. Open positions are displayed in the Portfolio Summary Section; the word "MISSING" appears where information is needed.

If you purchased (or sold short) any of the securities on different dates (e.g., 100 shares of AT&T on 1/21/96, 200 shares AT&T on 2/15/99), please list them separately. Please contact the Investment Center at 1-800-793-8050 if you have any questions.

ACCOUNT NUMBER [redacted]
STATEMENT DATE 12/31/04
REGISTERED REPRESENTATIVE HARRY PILSON 7038640775
PAGE NUMBER 1 of 2

SECURITY/TRANSACTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED (trade date)	ORIGINAL OR ADJUSTED COST BASIS*
ALCOA INC	AA	100	/ /	
			/ /	
INTEL CORP	INTC	175	/ /	
			/ /	
JOHNSON & JOHNSON	JNJ	100	/ /	
			/ /	
J C PENNEY CO INC	JCP	160	/ /	
			/ /	

*The basis of stocks or bonds you own generally is the purchase price plus the costs of purchase, including commissions and other miscellaneous fees. Certain events (such as stock dividends, splits, or other distributions, returns of capital, accrued interest paid on bonds, and OID payments, etc.) may require an adjustment to your basis. Consult IRS Publications 550, Investment Income and Expense (including Capital Gains and Losses) or your tax professional for additional information.

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REQUEST FOR MISSING COST INFORMATION (CONTINUED)

ACCOUNT NUMBER [redacted]
STATEMENT DATE 12/31/04
REGISTERED REPRESENTATIVE HARRY PILSON 7035640775
PAGE NUMBER 2 of 2

SECURITY/TRANSACTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED (trade date)	ORIGINAL OR ADJUSTED COST BASIS*
WELLS FARGO & CO	WFC	120	/ /	
			/ /	

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INDIVIDUAL ACCOUNT

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December 1, 2004 - December 31, 2004

ACCOUNT NUMBER [redacted]6

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Your Financial Consultant
HARRY PILSON
(703) 564-0775

#BWNFQNP
#139HCHGF13PP6#

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1211 SUMMIT ROAD
MC LEAN VA 22101-2838

ACCOUNT SUMMARY

	OPENING BALANCE	CLOSING BALANCE
NET ACCOUNT BALANCE	$0.00	$0.00
Money Market funds	2,975.26	5,672.40
Securities	169,271.46	175,607.96
TOTAL PRICED PORTFOLIO	172,246.72	181,280.36
Total Portfolio Equity	$172,246.72	$181,280.36

PORTFOLIO EQUITY ALLOCATION

INCOME AND EXPENSE SUMMARY

	THIS PERIOD	YEAR TO DATE
Taxable dividends	$1,078.76	$1,151.42
Taxable money market div	0.00	28.75

SIPC

See Reverse Side For Important Tax Information. The statement shall be conclusive if not objected to in writing within ten days. Errors and omissions accepted. Please address all communications to the firm and not to individuals. Address changes or other material changes on your account should be directed to the office servicing your account. Kindly mention your account number. **This statement should be retained for income tax purposes.**

Account Carried by
ADP Clearing & Outsourcing Services, Inc.
Member New York Stock Exchange, Inc
26 Broadway, New York, NY 10004-1798

NOT FDIC INSURED
No Bank guarantee
May lose value

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INDIVIDUAL ACCOUNT

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December 1, 2004 - December 31, 2004

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▶ ADP CLEARING & OUTSOURCING SERVICES, INC. (ADP CLEARING), FORMERLY KNOWN AS FLEET SECURITIES, INC., NET CAPITAL AT 10-31-04 WAS $240 MIL, EXCEEDING RQRMTS BY $220 MIL. ADP CLEARING'S AUDITED BALANCE SHEET MAY BE OBTAINED BY ACCESSING WWW.USCLEARING.COM/ABOUT_US.HTM, OR BY CALLING ADP CLEARING'S TOLL-FREE NUMBER AT 1-800-354-7429

▶ CAPITAL GAINS SUMMARY

The cost basis information displayed in your statement has been provided by you, your Registered Representative, or our transaction files and is used to determine your gains and losses. Unrealized gains or losses is an estimated figure and should not be used for tax preparation. Securities for which you have not provided us a cost basis or for which we do not have a current price are not included in this summary. We suggest you review all cost basis details for accuracy and completeness and contact your Registered Representative if you need to amend the information shown on this statement.

REALIZED	THIS PERIOD	YEAR TO DATE
Short-term gain/(loss)	$(5,747.04)	$(5,668.36)
Long-term gain/(loss)	N/A	N/A
Net realized gain/(loss)	**$(5,747.04)**	**$(5,668.36)**

UNREALIZED	THIS PERIOD
Short-term gain/(loss)	$11,388.40
Long-term gain/(loss)	N/A
Net unrealized gain/(loss)	**$11,388.40**

N/A-information was not available and is not reflected in the gain/(loss) summary

▶ REALIZED GAIN/LOSS DETAIL-THIS PERIOD REPORTED ON A TRADE DATE BASIS

DESCRIPTION	SYMBOL/ CUSIP	DATE ACQUIRED	DATE SOLD/CLOSED	QUANTITY	COST BASIS	PROCEEDS	SHORT-TERM GAIN/(LOSS)	LONG-TERM GAIN/(LOSS)
WELLPOINT HEALTH NETWORKS INC NEW	W003123_WLP	10/04/04	12/02/04	72	$7,460.64 ☐	$1,713.80	$(5,747.04)	
Total Realized Gain/Loss Detail This Period							$(5,747.04)	

☐ Based on information provided by you, your registered representative, or a third party.

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INDIVIDUAL ACCOUNT

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December 1, 2004 - December 31, 2004

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PORTFOLIO SUMMARY

DESCRIPTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED	CURRENT PRICE	COST BASIS	CURRENT MARKET VALUE	UNREALIZED GAIN/ (LOSS)	EST. ANNUAL INCOME	% OF TOTAL PORTFOLIO
MONEY MARKET FUNDS									
GALAXY FUNDS PRIME RESERVES FUND Estimated Yield 1.08%	GPRUX	5,672.4	VARIOUS	$1.00	$5,672.40	$5,672.40	N/A	$61	3.129%
Total Money Market Funds					**$5,672.40**	**$5,672.40**		**$61**	**3.129%**
EQUITIES / OPTIONS									
ALLERGAN INC	AGN	91	10/04/04	$81.07	$6,661.20	$7,377.37	$716.17	$33	4.070%
CHICAGO MERCANTILE EXCHANGE HOLDINGS INC CL A	CME	18	11/10/04	228.70	3,738.25	4,345.30	607.05	20	2.397%
ECHOSTAR COMMUNICATIONS CORP NEW-CL A	DISH	100	10/04/04	33.24	3,163.00	3,324.00	161.00		1.835%
		71	10/04/04	33.24	2,244.31	2,360.04	115.73		
		171			5,407.31	5,684.04	276.73		
EXPEDITORS INTERNATIONAL OF WASHINGTON INC	EXPD	118	10/04/04	55.68	6,257.54	6,593.84	336.30	26	3.637%
FIRST DATA CORP	FDC	169	10/04/04	42.54	6,342.48	6,040.08	(302.40)	15	4.435%
GENENTECH INC COM NEW	DNA	123	10/04/04	54.44	6,657.99	6,696.12	38.13		3.694%

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December 1, 2004 - December 31, 2004

ACCOUNT NUMBER [redacted]

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▶ PORTFOLIO SUMMARY (CONTINUED)

DESCRIPTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED	CURRENT PRICE	COST BASIS	CURRENT MARKET VALUE	UNREALIZED GAIN/ (LOSS)	EST. ANNUAL INCOME	% OF TOTAL PORTFOLIO
EQUITIES / OPTIONS (continued)									
GILLETTE CO	G	149	10/04/04	44.78	6,243.10	6,672.22	428.12	97	3.661%
INTL GAME TECHNOLOGY	IGT	120	10/04/04	34.38	4,126.80	4,126.80	(48.20)	70	2.750%
		25	11/18/04	34.38	858.00	858.00	(28.50)		
		145			5,062.80	4,985.10	(77.70)		
INTUIT INC	INTU	91	10/04/04	44.01	4,186.09	4,004.91	(180.18)		2.209%
LEXMARK INTERNATIONAL INC CL A WITH RIGHTS TO PURCHASE PREFRD STK UNDER CERTAIN CIRCUMSTANCE	LXK	48	10/04/04	86.00	4,224.00	4,080.00	(144.00)		2.251%
LIBERTY MEDIA INTL INC COM SER A	LBTYA	146	10/04/04	46.23	6,017.87	6,749.58	1,731.71		3.723%
MGM MIRAGE	MGG	67	10/04/04	72.74	3,378.14	4,873.58	1,495.44		2.688%
MARRIOTT INTERNATIONAL INC NEW CL A	MAR	94	10/04/04	62.96	5,012.08	5,920.12	908.04	32	3.266%
MOODYS CORP	MCO	83	10/04/04	86.85	6,258.20	7,208.55	950.35	25	3.976%
MICROSOFT CORP	MSFT	267	MISSING	26.71	MISSING	7,131.57	Δ	85	3.934%
NORTHERN TRUST CORP WITH RIGHTS TO PURCHASE PREFRD STK UNDER CERTAIN CIRCUMSTANCE	NTRS	122	10/04/04	46.55	5,003.10	5,926.78	923.68	102	3.269%

Δ Gain/Loss not computed because cost basis and/or date acquired is missing.

INDIVIDUAL ACCOUNT

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December 1, 2004 - December 31, 2004

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▶ PORTFOLIO SUMMARY (CONTINUED)

DESCRIPTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED	CURRENT PRICE	COST BASIS	CURRENT MARKET VALUE	UNREALIZED GAIN/ (LOSS)	EST ANNUAL INCOME	% OF TOTAL PORTFOLIO
EQUITIES / OPTIONS (continued)									
PAYCHEX INC	PAYX	202	10/04/04	34.08	6,262.00	6,884.16	622.16	105	3.798%
PRAXAIR INC	PX	136	10/04/04	44.16	5,845.28	6,004.40	159.12	62	3.312%
QUALCOMM INC	QCOM	203	10/04/04	42.40	8,406.23	8,607.20	200.97	57	4.748%
SANDISK CORP	SNDK	136	10/04/04	24.97	4,202.56	3,370.95	(831.60)		1.860%
STAPLES INC	SPLS	222	10/04/04	33.71	6,728.82	7,483.62	754.80	44	4.128%
UNITED PARCEL SVC INC CL B	UPS	100	MISSING	85.46	MISSING	8,546.00	Δ	112	4.714%
WEIGHT WATCHERS INTL INC NEW COM	WTW	128	10/04/04	41.07	5,008.84	5,256.96	248.32		2.900%
WELLPOINT INC	WLP	72	10/04/04	115.00	7,460.64 □	8,280.00	819.36		4.568%
WAL-MART STORES INC	WMT	109	MISSING	52.62	MISSING	5,737.38	Δ	67	3.176%
WALGREEN CO WITH RIGHTS TO PURCHASE PREFRD STK UNDER CERTAIN CIRCUMSTANCE	WAG	161	10/04/04	38.27	5,837.86	6,177.57	339.71	34	3.408%
XM SATELLITE RADIO HLDGS INC CL A	XMSR	176	10/04/04	37.52	5,297.43	6,621.12	1,323.69		3.652%
ZIMMER HOLDINGS INC	ZMH	79	10/04/04	80.12	6,286.03	6,329.46	43.43		3.492%
Total Equities					**$142,784.81**	**$175,807.96**	**$11,388.40**	**$996**	**96.871%**

□ Based on information provided by you, your registered representative, or a third party
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December 1, 2004 - December 31, 2004

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PORTFOLIO SUMMARY (CONTINUED)

DESCRIPTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED	CURRENT PRICE	COST BASIS	CURRENT MARKET VALUE	UNREALIZED GAIN/ (LOSS)	EST ANNUAL INCOME	% OF TOTAL PORTFOLIO
TOTAL PRICED PORTFOLIO						**$181,280.36**		**$1,067**	

ACCOUNT ACTIVITY

TRANSACTION	DATE	ACCOUNT TYPE	DESCRIPTION	QUANTITY	PRICE	DEBIT	CREDIT
DIVIDENDS AND INTEREST							
DIVIDEND	12/02/04	C	MICROSOFT CORP CASH DIV ON 287 SHS REC 11/17/04 PAY 12/02/04		$3.08		$822.36
DIVIDEND	12/03/04	C	GILLETTE CO CASH DIV ON 149 SHS REC 11/01/04 PAY 12/03/04		.1625		24.21
DIVIDEND	12/09/04	C	ALLERGAN INC CASH DIV ON 91 SHS REC 11/10/04 PAY 12/09/04		.09		8.19
DIVIDEND	12/10/04	C	MOODYS CORP CASH DIV ON 83 SHS REC 11/29/04 PAY 12/10/04		.075		6.23
DIVIDEND	12/13/04	C	WALGREEN CO CASH DIV ON 161 SHS REC 11/16/04 PAY 12/11/04		.0525		8.45
DIVIDEND	12/14/04	C	ECHOSTAR COMMUNICATIONS CORP NEW-CL A CASH DIV ON 171 SHS REC 12/06/04 PAY 12/14/04		1		171.00

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ACCOUNT NUMBER [redacted]

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▶ ACCOUNT ACTIVITY (CONTINUED)

TRANSACTION	DATE	ACCOUNT TYPE	DESCRIPTION	QUANTITY	PRICE	DEBIT	CREDIT
DIVIDENDS AND INTEREST			(continued)				
DIVIDEND	12/15/04	C	EXPEDITORS INTERNATIONAL OF WASHINGTON INC CASH DIV ON 118 SHS REC 12/01/04 PAY 12/15/04		.11		12.98
DIVIDEND	12/15/04	C	PRAXAIR INC CASH DIV ON 136 SHS REC 12/07/04 PAY 12/15/04		.15		20.40
DIVIDEND	12/27/04	C	CHICAGO MERCANTILE EXCHANGE HOLDINGS INC CL A CASH DIV ON 19 SHS REC 12/10/04 PAY 12/27/04		.26		4.94
Total Dividends and Interest							$1,078.76
MISCELLANEOUS TRANSACTIONS							
JOURNAL	12/01/04	C	MAP FEES 3QTR			$95.22	
JOURNAL	12/02/04	C	MAP FEES 3QTR			95.22	
MERGER	12/02/04	C	WELLPOINT INC SHRS RECEIVED THRU MERGER	72			
MERGER	12/02/04	C	WELLPOINT HEALTH NETWORKS INC NEW 1 FOR 1 INTO 94975V107 & CASH @ $23.80/SH	-72			1,713.60
JOURNAL	12/07/04	C	REV MAP FEES 3Q				95.22
Total Miscellaneous Transactions						$190.44	$1,808.82

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INDIVIDUAL ACCOUNT

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December 1, 2004 - December 31, 2004

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MONEY MARKET ACTIVITY

DATE	ACTIVITY	DESCRIPTION	TRANSACTION AMOUNT IN SHARES	DEBIT	CREDIT	BALANCE IN SHARES
GALAXY FUNDS						
	Opening Balance	**(Shares valued @ 1.00)**				**2,875.26**
12/02/04	SWEEP	GALAXY FUNDS PRIME RESERVES FUND EXPEDITED REDEMPTION	-95.22		95.22	2,880.04
12/03/04	SWEEP	GALAXY FUNDS PRIME RESERVES FUND FROM CASH ACCOUNT BALANCE	2,440.74	2,440.74		5,320.78
12/06/04	SWEEP	GALAXY FUNDS PRIME RESERVES FUND FROM CASH ACCOUNT BALANCE	24.21	24.21		5,344.99
12/08/04	SWEEP	GALAXY FUNDS PRIME RESERVES FUND FROM CASH ACCOUNT BALANCE	95.22	95.22		5,440.21
12/10/04	SWEEP	GALAXY FUNDS PRIME RESERVES FUND FROM CASH ACCOUNT BALANCE	8.19	8.19		5,448.40
12/13/04	SWEEP	GALAXY FUNDS PRIME RESERVES FUND FROM CASH ACCOUNT BALANCE	6.23	6.23		5,454.63
12/14/04	SWEEP	GALAXY FUNDS PRIME RESERVES FUND FROM CASH ACCOUNT BALANCE	8.45	8.45		5,463.08

INDIVIDUAL ACCOUNT

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December 1, 2004 - December 31, 2004

ACCOUNT NUMBER [redacted]

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▶ MONEY MARKET ACTIVITY (CONTINUED)

DATE	ACTIVITY	DESCRIPTION	TRANSACTION AMOUNT IN SHARES	DEBIT	CREDIT	BALANCE IN SHARES
GALAXY FUNDS	(continued)					
12/15/04	SWEEP	GALAXY FUNDS PRIME RESERVES FUND FROM CASH ACCOUNT BALANCE	171.00	171.00		5,634.08
12/16/04	SWEEP	GALAXY FUNDS PRIME RESERVES FUND FROM CASH ACCOUNT BALANCE	33.38	33.38		5,667.46
12/28/04	SWEEP	GALAXY FUNDS PRIME RESERVES FUND FROM CASH ACCOUNT BALANCE	4.94	4.94		5,672.40
	Closing Balance	**(Shares valued @ 1.00)**				**5,672.40**

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REQUEST FOR MISSING COST INFORMATION

For your convenience, this page lists any open securities positions for which we do not have cost basis information. An open position is a security that you have purchased or sold short but have not yet realized a gain or loss. Open positions are displayed in the Portfolio Summary Section, the word "MISSING" appears where information is needed.

If you purchased (or sold short) any of the securities on different dates (e.g., 100 shares of AT&T on 1/21/96, 200 shares AT&T on 2/15/99), please list them separately. Please contact the Investment Center at 1-800-793-8050 if you have any questions

ACCOUNT NUMBER [redacted]
STATEMENT DATE 12/31/04
REGISTERED REPRESENTATIVE HARRY WILSON 7035540775
PAGE NUMBER 1 of 1

SECURITY/TRANSACTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED (trade date)	ORIGINAL OR ADJUSTED COST BASIS*
MICROSOFT CORP	MSFT	267	/ /	
			/ /	
UNITED PARCEL SVC INC CL B	UPS	100	/ /	
			/ /	
WAL-MART STORES INC	WMT	100	/ /	
			/ /	

** The basis of stocks or bonds you own generally is the purchase price plus the costs of purchase, including commissions and other miscellaneous fees. Certain events (such as stock dividends, splits, or other distributions, returns of capital, accrued interest paid on bonds, and OID payments, etc.) may require an adjustment to your basis. Consult IRS Publications 550, Investment Income and Expenses (Including Capital Gains and Losses) or your tax professional for additional information.*

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December 1, 2004 - December 31, 2004

ACCOUNT NUMBER [redacted]

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Your Financial Consultant
HARRY PILSON
(703) 564-0775

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CLEARWATER, FL 33764
TEL: (727)532-6975
1-800-282-8929 (NATIONWIDE)

#BWNFQNP
#139HNTNC17PP2#

LAMAR SMITH
LE ACCOUNT
MANAGED ASSETS PROGRAM-LOS
1211 SUMMIT ROAD
MC LEAN VA 22101-2838

ACCOUNT SUMMARY

	OPENING BALANCE	CLOSING BALANCE
Cash account	$3.58	$30.00
NET ACCOUNT BALANCE	3.58	30.00
Money Market funds	4,597.22	10,380.45
Securities	182,938.52	186,069.46
TOTAL PRICED PORTFOLIO	187,535.74	196,449.91
Total Portfolio Equity	$187,539.32	$196,479.91

PORTFOLIO EQUITY ALLOCATION

INCOME AND EXPENSE SUMMARY

	THIS PERIOD	YEAR TO DATE
Taxable dividends	$103.77	$398.20
Foreign tax paid	-2.80	-8.31
Taxable money market div	0.00	14.73

SIPC

See Reverse Side For Important Tax Information. This statement shall be conclusive if not objected to in writing within ten days. Errors and omissions excepted. Please address all communications to the firm and not to individuals. Address changes or other material changes on your account should be directed to the office servicing your account. Kindly mention your account number. **This statement should be retained for income tax purposes.**

Account Carried by,
ADP Clearing & Outsourcing Services, Inc.
Member New York Stock Exchange, Inc
26 Broadway, New York, NY 10004 1798

NOT FDIC INSURED
No Bank guarantee
May lose value

INDIVIDUAL ACCOUNT

Qpartner

December 1, 2004 - December 31, 2004

ACCOUNT NUMBER [redacted]

LAMAR SMITH
LE ACCOUNT
MANAGED ASSETS PROGRAM-LOS

Banc of America Investment Services, Inc.®

17757 US HIGHWAY 19 NORTH
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▶ ADP CLEARING & OUTSOURCING SERVICES, INC. (ADP CLEARING), FORMERLY KNOWN AS FLEET SECURITIES, INC., NET CAPITAL AT 10-31-04 WAS $240 MIL, EXCEEDING RQRMTS BY $220 MIL. ADP CLEARING'S AUDITED BALANCE SHEET MAY BE OBTAINED BY ACCESSING WWW.USCLEARING.COM/ABOUT_US.HTM, OR BY CALLING ADP CLEARING'S TOLL-FREE NUMBER AT 1-800-354-7429.

▶ CAPITAL GAINS SUMMARY

The cost basis information displayed in your statement has been provided by you, your Registered Representative, or our transaction files and is used to determine your gains and losses. Unrealized gains or losses is an estimated figure and should not be used for tax preparation. Securities for which you have not provided us a cost basis or for which we do not have a current price are not included in this summary. We suggest you review all cost basis details for accuracy and completeness and contact your Registered Representative if you need to amend the information shown on this statement.

	THIS PERIOD	YEAR TO DATE		THIS PERIOD
REALIZED			UNREALIZED	
Short-term gain/(loss)	$1,087.71	$1,159.59	Short-term gain/(loss)	$19,443.15
Long-term gain/(loss)	N/A	N/A	Long-term gain/(loss)	N/A
Net realized gain/(loss)	**$1,087.71**	**$1,159.59**	**Net unrealized gain/(loss)**	**$19,443.15**

N/A-information was not available and is not reflected in the gain/(loss) summary.

▶ REALIZED GAIN/LOSS DETAIL THIS PERIOD REPORTED ON A TRADE DATE BASIS

DESCRIPTION	SYMBOL/ CUSIP	DATE ACQUIRED	DATE SOLD/CLOSED	QUANTITY	COST BASIS	PROCEEDS	SHORT-TERM GAIN/(LOSS)	LONG-TERM GAIN/(LOSS)
ARGOSY GAMING CORP	AGY	MISSING	12/06/04	64	MISSING	$2,986.97	Δ	Δ
		09/24/04	12/06/04	63	2,377.62	2,920.61	542.99 Δ	Δ
PLANAR SYSTEMS INC	PLNR	MISSING	12/06/04	57	MISSING	626.98	Δ	Δ
		06/25/04	12/06/04	28	355.50	307.99	(47.51)	
		09/24/04	12/06/04	86	965.78	945.98	(19.80) Δ	Δ
SILGAN HOLDINGS INC	SLGN	06/25/04	12/06/04	20	804.20	1,091.77	287.57	

Δ Gain/loss not computed because cost basis and/or date acquired is missing.

Qpartner

December 1, 2004 - December 31, 2004

ACCOUNT NUMBER [redacted]

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LAMAR SMITH
LE ACCOUNT
MANAGED ASSETS PROGRAM-LOS

▶ REALIZED GAIN/LOSS DETAIL THIS PERIOD(CONTINUED)

DESCRIPTION	SYMBOL/ CUSIP	DATE ACQUIRED	DATE SOLD/CLOSED	QUANTITY	COST BASIS	PROCEEDS	SHORT-TERM GAIN/(LOSS)	LONG-TERM GAIN/(LOSS)
SILGAN HOLDINGS INC		09/24/04	12/06/04	19	861.27	1,037.19	175.92	
							463.49	
UNITED DEFENSE INDUSTRIES INC	UDI	MISSING	12/06/04	50	MISSING	2,302.84	Δ	Δ
		09/24/04	12/06/04	10	396.90	460.59	63.69	
							Δ	Δ
VARCO INTL INC DEL	VRC	MISSING	12/06/04	71	MISSING	2,002.86	Δ	Δ
		09/24/04	12/06/04	68	1,833.28	1,918.23	84.95	
							Δ	Δ
Total Realized Gain/Loss Detail This Period							$1,087.71	

▶ PORTFOLIO SUMMARY

DESCRIPTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED	CURRENT PRICE	COST BASIS	CURRENT MARKET VALUE	UNREALIZED GAIN/ (LOSS)	EST. ANNUAL INCOME	% OF TOTAL PORTFOLIO
MONEY MARKET FUNDS									
GALAXY FUNDS PRIME RESERVES FUND Estimated Yield 1.08%	GPRXX	10,380.46	VARIOUS	$1.00	$10,380.46	$10,380.46	N/A	$112	6.263%
Total Money Market Funds					**$10,380.46**	**$10,380.46**		**$112**	**6.263%**
EQUITIES / OPTIONS									
ANSYS INC	ANSS	58	MISSING	$32.06	MISSING	$1,859.48	Δ		1.926%

Δ Gain/Loss not computed because cost basis and/or date acquired is missing

INDIVIDUAL ACCOUNT

Qpartner

December 1, 2004 - December 31, 2004

ACCOUNT NUMBER [redacted]

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LAMAR SMITH
LE ACCOUNT
MANAGED ASSETS PROGRAM-LOS

▶ PORTFOLIO SUMMARY (CONTINUED)

DESCRIPTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED	CURRENT PRICE	COST BASIS	CURRENT MARKET VALUE	UNREALIZED GAIN/ (LOSS)	EST. ANNUAL INCOME	% OF TOTAL PORTFOLIO
EQUITIES / OPTIONS (continued)									
ANSYS INC		50	09/24/04	32.06	1,437.30	1,623.60	486.30		
		118			1,437.30	3,783.06	Δ		
AFFILIATED MANAGERS GROUP INC	AMG	37	MISSING	67.74	MISSING	2,506.38	Δ		2.551%
		37	09/24/04	67.74	1,995.04	2,506.38	511.34		
		74			1,995.04	5,012.76	Δ		
AMERUS GROUP CO	AMH	43	MISSING	45.30	MISSING	1,947.90	Δ	34	1.983%
		43	09/24/04	45.30	1,750.96	1,947.90	196.94		
		86			1,750.96	3,895.80	Δ		
ANTEON INTL CORP	ANT	33	MISSING	41.86	MISSING	1,381.38	Δ		2.429%
		24	09/25/04	41.86	736.32	1,004.64	268.32		
		57	09/24/04	41.86	1,989.30	2,386.02	396.72		
		114			2,725.62	4,772.04	Δ		
AMERICAN HOME MORTGAGE INVESTMENT CORP	AHM	67	MISSING	34.25	MISSING	2,294.75	Δ	348	2.301%
		65	09/24/04	34.25	1,873.95	2,226.25	352.30		
		132			1,873.95	4,521.00	Δ		
AGCO CORP	AG	149	09/24/04	21.89	3,264.58	3,261.61	(2.96)		1.590%
BLYTH INC (FORM BLYTH INDS INC)	BTH	43	MISSING	29.56	MISSING	1,271.08	Δ	32	1.279%
		42	09/24/04	29.56	1,293.60	1,241.52	(52.08)		
		85			1,293.60	2,512.60	Δ		

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INDIVIDUAL ACCOUNT

Quest partner

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LAMAR SMITH
LE ACCOUNT
MANAGED ASSETS PROGRAM-LOS

▶ PORTFOLIO SUMMARY (CONTINUED)

DESCRIPTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED	CURRENT PRICE	COST BASIS	CURRENT MARKET VALUE	UNREALIZED GAIN/ (LOSS)	EST. ANNUAL INCOME	% OF TOTAL PORTFOLIO
EQUITIES / OPTIONS (continued)									
CENTURY ALUMINUM CO	CENX	63	12/06/04	26.28	1,566.34	1,654.38	88.04		0.842%
CORIXA CORP	CRIXA	194	MISSING	3.64	MISSING	706.18	△		0.943%
		60	06/04/04	3.64	252.60	218.40	(34.20)		
		255	09/24/04	3.64	1,047.80	928.20	(119.60)		
		509			1,300.40	1,852.76	△		
COVENTRY HEALTH CARE INC	CVH	34	MISSING	53.09	MISSING	1,910.98	△		1.945%
		38	09/24/04	53.08	1,873.80	1,910.98	37.08		
		72			1,873.80	3,821.76	△		
CACI INTERNATIONAL INC-CL A	CAI	32	MISSING	68.13	MISSING	2,180.16	△		2.254%
		33	09/24/04	68.13	1,709.73	2,248.29	538.56		
		65			1,709.73	4,428.45	△		
COHERENT INC WITH RIGHTS TO PURCHASE COMMON STK UNDER CERTAIN CIRCUMSTANCE	COHR	45	MISSING	30.44	MISSING	1,368.80	△		1.410%
		46	09/24/04	30.44	1,162.88	1,400.24	237.36		
		91			1,162.88	2,770.04	△		
COMTECH TELECOMMUNICATIONS CORP NEW	CMTL	8	MISSING	37.81	MISSING	226.86	△		1.637%
		42	09/25/04	37.81	961.80	1,579.62	617.82		
		49	09/24/04	37.61	1,323.00	1,842.69	519.69		
		97			2,284.80	3,648.17	△		
DORAL FINANCIAL CORP	DRL	46	MISSING	49.25	MISSING	2,265.50	△	66	2.281%

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INDIVIDUAL ACCOUNT

Qpartner

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LAMAR SMITH
LE ACCOUNT
MANAGED ASSETS PROGRAM-LOS

▶ PORTFOLIO SUMMARY (CONTINUED)

DESCRIPTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED	CURRENT PRICE	COST BASIS	CURRENT MARKET VALUE	UNREALIZED GAIN/ (LOSS)	EST ANNUAL INCOME	% OF TOTAL PORTFOLIO
EQUITIES / OPTIONS (continued)									
DORAL FINANCIAL CORP		46	09/24/04	49.25	1,890.90	2,116.25	325.35		
		91			1,890.90	4,481.75	△		
E&S TECHNOLOGY INC	ESST	110	MISSING	7.11	MISSING	782.10	△		0.796%
		110	09/24/04	7.11	799.70	782.10	(17.60)		
		220			799.70	1,564.20	△		
ENERGY PARTNERS LTD	EPL	131	08/04/04	20.27	2,031.81	2,656.37	623.56		2.703%
		131	09/24/04	20.27	2,105.17	2,655.37	550.20		
		262			4,136.98	5,310.74	1,173.76		
FLAGSTAR BANCORP INC	FBC	10	MISSING	22.60	MISSING	226.00	△	120	1.380%
		32	08/25/04	22.60	649.92	723.20	73.28		
		43	09/24/04	22.60	913.78	971.80	58.05		
		35	12/06/04	22.80	798.60	791.00	(5.60)		
		120			2,360.27	2,712.00	△		
FIRSTFED FINANCIAL CORP DEL	FED	31	MISSING	61.87	MISSING	1,807.97	△		1.346%
		6	08/04/04	61.87	269.70	311.22	41.52		
		14	09/24/04	61.87	669.90	726.18	56.28		
		51			939.60	2,845.37	△		
FREMONT GENERAL CORP	FMT	65	MISSING	25.18	MISSING	1,636.70	△	56	2.563%
		38	08/04/04	25.18	945.75	881.30	235.55		
		100	09/24/04	25.18	2,236.00	2,518.00	283.00		
		200			2,880.75	5,036.00	△		

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LAMAR SMITH
LE ACCOUNT
MANAGED ASSETS PROGRAM-LOS

▶ PORTFOLIO SUMMARY (CONTINUED)

DESCRIPTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED	CURRENT PRICE	COST BASIS	CURRENT MARKET VALUE	UNREALIZED GAIN/ (LOSS)	EST. ANNUAL INCOME	% OF TOTAL PORTFOLIO
EQUITIES / OPTIONS (continued)									
GENLYTE GROUP INC	GLYT	32	MISSING	85.66	MISSING	2,741.76	Δ		2.791%
WITH RIGHTS TO PURCHASE PREFRD		32	09/24/04	85.66	2,113.92	2,741.76	627.84		
STK UNDER CERTAIN CIRCUMSTANCE		64			2,113.92	5,483.52	Δ		
GRIFFON CORP	GFF	80	06/25/04	27.00	2,003.40	2,430.00	426.60		2.474%
WITH RIGHTS TO PURCHASE PREFRD		90	09/24/04	27.00	1,887.30	2,430.00	542.70		
STK UNDER CERTAIN CIRCUMSTANCE		160			3,890.70	4,860.00	969.30		
GUILFORD PHARMACEUTICALS INC	GLFD	222	MISSING	4.95	MISSING	1,098.90	Δ		1.164%
		236	09/24/04	4.95	1,165.60	1,168.20	2.60		
		458			1,165.60	2,267.10	Δ		
IDT CORP	IDTC	60	08/04/04	14.68	906.50	880.80	(25.80)		0.904%
		61	09/24/04	14.68	908.29	895.48	(12.81)		
		121			1,814.89	1,776.28	(38.61)		
HELEN OF TROY LTD-BERMUDA	HELE	71	MISSING	33.81	MISSING	2,386.31	Δ		2.429%
		71	09/24/04	33.81	1,883.05	2,386.31	501.26		
		142			1,883.05	4,772.62	Δ		
HERLEY INDUSTRIES INC	HRLY	120	12/06/04	20.34	2,410.68	2,440.80	30.12		1.242%
HUTCHINSON TECHNOLOGY INC	HTCH	36	MISSING	34.57	MISSING	1,244.52	Δ		2.084%
		23	05/25/04	34.57	576.61	795.11	218.50		

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▶ PORTFOLIO SUMMARY (CONTINUED)

DESCRIPTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED	CURRENT PRICE	COST BASIS	CURRENT MARKET VALUE	UNREALIZED GAIN/ (LOSS)		EST. ANNUAL INCOME	% OF TOTAL PORTFOLIO
EQUITIES / OPTIONS (continued)										
HUTCHINSON TECHNOLOGY INC		60	09/24/04	34.67	1,570.20	2,074.20	504.00			
		119			2,146.81	4,113.83		Δ		
HOVNANIAN ENTERPRISES INC-CL A	HOV	28	MISSING	49.52	MISSING	1,386.56		Δ		1.411%
		28	09/24/04	49.52	1,137.08	1,386.56	249.48			
		56			1,137.08	2,773.12		Δ		
INTEGRATED DEVICE TECHNOLOGY WITH RIGHTS TO PURCHASE PREFRD STK UNDER CERTAIN CIRCUMSTANCE	IDTI	106	MISSING	11.58	MISSING	1,225.38		Δ		1.253%
		107	09/24/04	11.58	1,015.43	1,236.92	221.49			
		213			1,015.43	2,462.28		Δ		
LATTICE SEMICONDUCTOR CORP WITH RIGHTS TO PURCHASE PREFRD STK UNDER CERTAIN CIRCUMSTANCE	LSCC	96	MISSING	5.70	MISSING	547.20		Δ		0.879%
		55	06/25/04	5.70	378.65	313.50	(62.16)			
		152	09/24/04	5.70	729.60	866.40	136.80			
		303			1,108.25	1,727.10		Δ		
MAVERICK TUBE CORP	MVK	135	12/06/04	30.30	4,133.70	4,090.50	(43.20)			2.062%
MI HOMES INC FORMERLY M I SCHOTTENSTEIN HOMES INC NEW	MHO	31	MISSING	56.11	MISSING	1,708.41		Δ	6	1.711%
		30	09/24/04	56.11	1,261.50	1,653.30	391.80			
		61			1,261.50	3,361.71		Δ		
MEDAREX INC	MEDX	220	MISSING	10.78	MISSING	2,371.60		Δ		2.409%
		219	09/24/04	10.78	1,653.45	2,360.82	707.37			
		439			1,653.45	4,732.42		Δ		
METHANEX CORP	MEOH	171	MISSING	18.28	MISSING	3,122.48		Δ	106	3.132%

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INDIVIDUAL ACCOUNT

Qpartner

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▶ PORTFOLIO SUMMARY (CONTINUED)

DESCRIPTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED	CURRENT PRICE	COST BASIS	CURRENT MARKET VALUE	UNREALIZED GAIN/ (LOSS)	EST. ANNUAL INCOME	% OF TOTAL PORTFOLIO
EQUITIES / OPTIONS (continued)									
METHANEX CORP		168	09/24/04	18.26	2,325.49	3,031.16	705.67		
		337			2,325.49	6,153.62	Δ		
MENTOR GRAPHICS CORP	MENT	45	06/25/04	15.29	684.35	686.05	(8.30)		1.549%
		45	09/24/04	15.29	506.26	688.05	181.80		
		109	12/06/04	15.29	1,480.22	1,668.61	188.39		
		199			2,680.82	3,042.71	361.89		
PHARMACEUTICAL PRODUCT DEVELOPMENT INC	PPDI	39	06/25/04	41.29	1,242.16	1,610.31	368.16		1.839%
		39	09/24/04	41.29	1,425.46	1,610.31	184.86		
		78			2,667.60	3,220.62	553.02		
PACIFICARE HEALTH SYSTEMS INC DEL	PHS	42	MISSING	56.52	MISSING	2,373.84	Δ		2.416%
		42	09/24/04	56.52	1,443.96	2,373.84	929.88		
		84			1,443.96	4,747.68	Δ		
PRASCIS PHARMACEUTICALS INC	PRCS	201	06/25/04	1.90	741.49	381.90	(359.59)		0.615%
		116	09/04/04	1.90	271.32	220.40	(50.92)		
		319	09/24/04	1.90	691.91	606.10	(85.81)		
		636			1,704.72	1,208.40	(496.32)		
PAR PHARMACEUTICAL COMPANIES INC	PRX	33	06/25/04	41.38	1,175.13	1,365.54	190.41		1.390%
		33	09/24/04	41.38	1,193.61	1,365.54	171.93		
		66			2,368.74	2,731.08	362.34		
OPTION CARE INC	OPTN	72	06/25/04	17.19	1,051.20	1,237.68	186.48	14	1.568%

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PORTFOLIO SUMMARY (CONTINUED)

DESCRIPTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED	CURRENT PRICE	COST BASIS	CURRENT MARKET VALUE	UNREALIZED GAIN/ (LOSS)	EST. ANNUAL INCOME	% OF TOTAL PORTFOLIO
EQUITIES / OPTIONS (continued)									
OPTION CARE INC		107	09/24/04	17.19	1,568.68	1,839.33	260.45		
		179			2,610.08	3,077.01	466.93		
R&G FINANCIAL CORP-CL B	RGF	53	MISSING	38.98	MISSING	2,060.64	Δ	46	2.098%
		53	09/24/04	34.88	2,036.79	2,060.64	23.85		
		106			2,036.79	4,121.28	Δ		
RADIAN GROUP INC	RDN	31	MISSING	53.24	MISSING	1,650.44	Δ	5	1.680%
		31	09/24/04	53.24	1,386.32	1,650.44	264.12		
		62			1,386.32	3,300.88	Δ		
SILGAN HOLDINGS INC	SLGN	29	09/24/04	60.96	1,314.57	1,767.84	453.27	17	0.900%
SANDERSON FARMS INC WITH RIGHTS TO PURCHASE PREFRD STK UNDER CERTAIN CIRCUMSTANCE	SAFM	22	MISSING	43.28	MISSING	952.16	Δ	16	0.969%
		22	09/24/04	43.28	732.38	952.16	219.78		
		44			732.38	1,904.32	Δ		
JOHN B SANFILIPPO & SON INC	JBSS	50	09/07/04	25.78	1,418.00	1,289.00	(129.00)		1.312%
		50	09/24/04	25.78	1,256.50	1,289.00	32.50		
		100			2,674.50	2,578.00	(96.50)		
SPSS INC	SPSS	63	MISSING	15.64	MISSING	985.32	Δ		0.995%
		62	09/24/04	15.64	842.58	969.68	127.10		
		125			842.58	1,955.00	Δ		
SOUTHWESTERN ENERGY CO	SWN	55	08/25/04	50.69	1,556.15	2,787.95	1,229.80		2.761%
		9	08/04/04	50.69	290.25	456.21	165.96		

Δ Gain/Loss not computed because cost basis and/or date acquired is missing.

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December 1, 2004 - December 31, 2004

ACCOUNT NUMBER [redacted]

Banc of America Investment Services, Inc.®

17757 US HIGHWAY 19 NORTH
BUILDING TWO, SUITE 300
CLEARWATER, FL 33764
TEL: (727)532-6975
1-800-282-8929 (NATIONWIDE)

LAMAR SMITH
LE ACCOUNT
MANAGED ASSETS PROGRAM-LOS

▶ PORTFOLIO SUMMARY (CONTINUED)

DESCRIPTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED	CURRENT PRICE	COST BASIS	CURRENT MARKET VALUE	UNREALIZED GAIN/ (LOSS)	EST. ANNUAL INCOME	% OF TOTAL PORTFOLIO
EQUITIES / OPTIONS (continued)									
SOUTHWESTERN ENERGY CO		43	09/24/04	50.69	1,714.41	2,179.87	465.26		
		107			3,562.81	5,423.83	1,861.02		
STANLEY FURNITURE CO INC NEW	STLY	28	09/07/04	44.95	1,177.40	1,258.60	81.20	22	1.281%
		28	09/24/04	44.95	1,208.48	1,258.60	50.12		
		56			2,385.88	2,517.20	131.32		
TEEKAY SHIPPING CORP	TK	51	MISSING	42.11	MISSING	2,147.61	Δ	53	2.208%
MARSHALL ISLAND		52	09/24/04	42.11	2,202.72	2,189.72	(13.00)		
		103			2,202.72	4,337.33	Δ		
TENNECO AUTOMOTIVE INC	TEN	67	09/07/04	17.24	903.83	1,155.08	251.25		1.176%
		67	09/24/04	17.24	859.61	1,155.08	295.47		
		134			1,763.44	2,310.16	546.72		
TOLL BROTHERS INC	TOL	40	MISSING	68.61	MISSING	2,744.40	Δ		2.759%
		39	09/24/04	68.61	1,833.00	2,675.79	842.79		
		79			1,833.00	5,420.19	Δ		
TORO CO	TTC	37	06/25/04	81.35	2,586.30	3,009.95	423.65	36	3.064%
WITH RIGHTS TO PURCHASE PREFRD		37	09/24/04	81.35	2,513.04	3,009.95	496.91		
STK UNDER CERTAIN CIRCUMSTANCE		74			5,099.34	6,019.90	920.56		
U S CONCRETE INC	RMIX	146	MISSING	7.67	MISSING	1,119.82	Δ		1.140%

Δ Gain/Loss not computed because cost basis and/or date acquired is missing.

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December 1, 2004 - December 31, 2004

ACCOUNT NUMBER [redacted]

Banc of America Investment Services, Inc.®

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LAMAR SMITH
LE ACCOUNT
MANAGED ASSETS PROGRAM-LOS

▶ PORTFOLIO SUMMARY (CONTINUED)

DESCRIPTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED	CURRENT PRICE	COST BASIS	CURRENT MARKET VALUE	UNREALIZED GAIN (LOSS)	EST. ANNUAL INCOME	% OF TOTAL PORTFOLIO
EQUITIES / OPTIONS (continued)									
U S CONCRETE INC		146	09/24/04	7.67	905.05	1,119.82	214.77		
		292			905.05	2,239.64	Δ		
WORLD ACCEPTANCE CORP-S.C.	WRLD	99	MISSING	27.51	MISSING	2,723.49	Δ		2.772%
		99	09/24/04	27.51	2,321.55	2,723.49	401.94		
		198			2,321.55	5,446.98	Δ		
Total Equities					**$107,863.81**	**$186,069.46**	**$19,443.15**	**$981**	**94.702%**
Total Cash (Net Portfolio Balance)						**$30.00**			**0.015%**
TOTAL PRICED PORTFOLIO						**$196,479.91**		**$1,093**	

▶ ACCOUNT ACTIVITY

TRANSACTION	DATE	ACCOUNT TYPE	DESCRIPTION	QUANTITY	PRICE	DEBIT	CREDIT
BUY / SELL TRANSACTIONS							
BOUGHT	12/09/04	C	CENTURY ALUMINUM CO UNSOLICITED MAP	63	$25.18	$1,586.34	
BOUGHT	12/09/04	C	FLAGSTAR BANCORP INC UNSOLICITED MAP	35	22.78	796.60	

Δ Gain/Loss not computed because cost basis and/or date acquired is missing.

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December 1, 2004 - December 31, 2004

ACCOUNT NUMBER [redacted]

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▶ ACCOUNT ACTIVITY (CONTINUED)

TRANSACTION	DATE	ACCOUNT TYPE	DESCRIPTION	QUANTITY	PRICE	DEBIT	CREDIT
BUY / SELL TRANSACTIONS			(continued)				
BOUGHT	12/09/04	C	HERLEY INDUSTRIES INC UNSOLICITED MAP	120	20.089	2,410.68	
BOUGHT	12/09/04	C	MAVERICK TUBE CORP UNSOLICITED MAP	135	30.62	4,133.70	
BOUGHT	12/09/04	C	MENTOR GRAPHICS CORP UNSOLICITED MAP	109	13.58	1,480.22	
SOLD	12/09/04	C	ARGOSY GAMING CORP UNSOLICITED MAP	127	46.36		5,887.58
SOLD	12/09/04	C	PLANAR SYSTEMS INC UNSOLICITED MAP	171	11		1,880.95
SOLD	12/09/04	C	SILGAN HOLDINGS INC UNSOLICITED MAP	39	54.59		2,128.98
SOLD	12/09/04	C	UNITED DEFENSE INDUSTRIES INC UNSOLICITED MAP	60	46.06		2,763.53
SOLD	12/09/04	C	VARCO INTL INC DEL UNSOLICITED MAP	139	28.21		3,921.09
Total Buy / Sell Transactions						$10,407.54	$16,582.11

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INDIVIDUAL ACCOUNT

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December 1, 2004 - December 31, 2004

ACCOUNT NUMBER [redacted]

Banc of America Investment Services, Inc.®

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ACCOUNT ACTIVITY (CONTINUED)

TRANSACTION	DATE	ACCOUNT TYPE	DESCRIPTION	QUANTITY	PRICE	DEBIT	CREDIT
DIVIDENDS AND INTEREST							
DIVIDEND	12/03/04	C	DORAL FINANCIAL CORP CASH DIV ON 91 SHS REC 11/12/04 PAY 12/03/04 FOREIGN TAX WITHHELD		$.18 WH	1.64	$16.38
DIVIDEND	12/15/04	C	AMERUS GROUP CO CASH DIV ON 86 SHS REC 11/26/04 PAY 12/15/04		.40		34.40
DIVIDEND	12/15/04	C	SILGAN HOLDINGS INC CASH DIV ON 68 SHS REC 12/01/04 PAY 12/15/04		.15		10.20
DIVIDEND	12/22/04	C	RADIAN GROUP INC CASH DIV ON 62 SHS REC 11/24/04 PAY 12/22/04		.02		1.24
DIVIDEND	12/23/04	C	R&G FINANCIAL CORP-CL B CASH DIV ON 106 SHS REC 12/17/04 PAY 12/23/04 FOREIGN TAX WITHHELD		.109 WH	1.16	11.55
DIVIDEND	12/31/04	C	FLAGSTAR BANCORP INC CASH DIV ON 120 SHS REC 12/15/04 PAY 12/31/04		.25		30.00
Total Dividends and Interest						$2.80	$103.77
MISCELLANEOUS TRANSACTIONS							
JOURNAL	12/01/04	C	MAP FEES 3QTR			$465.89	
JOURNAL	12/02/04	C	MAP FEES 3QTR			465.89	

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December 1, 2004 - December 31, 2004

ACCOUNT NUMBER [redacted]

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ACCOUNT ACTIVITY (CONTINUED)

TRANSACTION	DATE	ACCOUNT TYPE	DESCRIPTION	QUANTITY	PRICE	DEBIT	CREDIT
MISCELLANEOUS TRANSACTIONS			(continued)				
JOURNAL	12/07/04	C	REV MAP FEES 3Q				465.89
Total Miscellaneous Transactions						$931.78	$465.89

MONEY MARKET ACTIVITY

DATE	ACTIVITY	DESCRIPTION	TRANSACTION AMOUNT IN SHARES	DEBIT	CREDIT	BALANCE IN SHARES
GALAXY FUNDS						
	Opening Balance	**(Shares valued @ 1.00)**				**4,597.22**
12/01/04	SWEEP	GALAXY FUNDS PRIME RESERVES FUND FROM CASH ACCOUNT BALANCE	3.58	3.58		4,600.80
12/02/04	SWEEP	GALAXY FUNDS PRIME RESERVES FUND EXPEDITED REDEMPTION	-465.89		465.89	4,134.91
12/03/04	SWEEP	GALAXY FUNDS PRIME RESERVES FUND EXPEDITED REDEMPTION	-465.89		465.89	3,669.02
12/06/04	SWEEP	GALAXY FUNDS PRIME RESERVES FUND FROM CASH ACCOUNT BALANCE	14.74	14.74		3,683.76
12/08/04	SWEEP	GALAXY FUNDS PRIME RESERVES FUND FROM CASH ACCOUNT BALANCE	465.89	465.89		4,149.65

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December 1, 2004 - December 31, 2004

ACCOUNT NUMBER [redacted]

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▶ MONEY MARKET ACTIVITY (CONTINUED)

DATE	ACTIVITY	DESCRIPTION	TRANSACTION AMOUNT IN SHARES	DEBIT	CREDIT	BALANCE IN SHARES
GALAXY FUNDS	(continued)					
12/09/04	SWEEP	GALAXY FUNDS PRIME RESERVES FUND FROM PROCEEDS OF SALE	6,174.57	6,174.57		10,324.22
12/16/04	SWEEP	GALAXY FUNDS PRIME RESERVES FUND FROM CASH ACCOUNT BALANCE	44.60	44.60		10,368.82
12/23/04	SWEEP	GALAXY FUNDS PRIME RESERVES FUND FROM CASH ACCOUNT BALANCE	1.24	1.24		10,370.06
12/27/04	SWEEP	GALAXY FUNDS PRIME RESERVES FUND FROM CASH ACCOUNT BALANCE	10.39	10.39		10,380.45
	Closing Balance	**(Shares valued @ 1.00)**				**10,380.45**

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REQUEST FOR MISSING COST INFORMATION

For your convenience, this page lists any open securities positions for which we do not have cost basis information. An open position is a security that you have purchased or sold short but have not yet realized a gain or loss. Open positions are displayed in the Portfolio Summary Section; the word "MISSING" appears where information is needed.

If you purchased (or sold short) any of the securities on different dates (e.g., 100 shares of AT&T on 1/21/98, 200 shares AT&T on 2/15/99), please list them separately. Please contact the Investment Center at 1-800-793-8050 if you have any questions.

ACCOUNT NUMBER [redacted]
STATEMENT DATE 12/31/04
REGISTERED REPRESENTATIVE HARRY PILSON 7035640776
PAGE NUMBER 1 of 5

SECURITY/TRANSACTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED (trade date)	ORIGINAL OR ADJUSTED COST BASIS*
ANSYS INC	ANSS	58	/ /	
			/ /	
AFFILIATED MANAGERS GROUP INC	AMG	37	/ /	
			/ /	
AMERUS GROUP CO	AMH	43	/ /	
			/ /	
ANTEON INTL CORP	ANT	33	/ /	
			/ /	

*The basis of stocks or bonds you own generally is the purchase price plus the costs of purchase, including commissions and other miscellaneous fees. Certain events (such as stock dividends, splits, or other distributions, returns of capital, accrued interest paid on bonds, and OID payments, etc.) may require an adjustment to your basis. Consult IRS Publications 550, Investment Income and Expense (including Capital Gains and Losses) or your tax professional for additional information.

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REQUEST FOR MISSING COST INFORMATION (CONTINUED)

ACCOUNT NUMBER [redacted]
STATEMENT DATE 12/31/04
REGISTERED REPRESENTATIVE HARRY PILSON 7085640775
PAGE NUMBER 2 of 8

SECURITY/TRANSACTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED (trade date)	ORIGINAL OR ADJUSTED COST BASIS*
AMERICAN HOME MORTGAGE INVESTMENT CORP	AHM	67	/ /	
			/ /	
BLYTH INC (FORM BLYTH INDS INC)	BTH	43	/ /	
			/ /	
CORIXA CORP	CRXA	194	/ /	
			/ /	
COVENTRY HEALTH CARE INC	CVH	36	/ /	
			/ /	
CACI INTERNATIONAL INC-CL A	CAI	32	/ /	
			/ /	

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REQUEST FOR MISSING COST INFORMATION (CONTINUED)

ACCOUNT NUMBER [redacted]
STATEMENT DATE 12/31/04
REGISTERED REPRESENTATIVE HARRY PILSON 7035640775
PAGE NUMBER 3 of 6

SECURITY/TRANSACTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED (trade date)	ORIGINAL OR ADJUSTED COST BASIS*
COHERENT INC WITH RIGHTS TO PURCHASE COMMON STK UNDER CERTAIN CIRCUMSTANCE	COHR	45	/ /	
			/ /	
COMTECH TELECOMMUNICATIONS CORP NEW	CMTL	6	/ /	
			/ /	
DORAL FINANCIAL CORP	DRL	46	/ /	
			/ /	
ESS TECHNOLOGY INC	ESST	110	/ /	
			/ /	
FLAGSTAR BANCORP INC	FBC	10	/ /	
			/ /	

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REQUEST FOR MISSING COST INFORMATION (CONTINUED)

ACCOUNT NUMBER [redacted]
STATEMENT DATE 12/31/04
REGISTERED REPRESENTATIVE HARRY PILSON 7085640775
PAGE NUMBER 4 of 8

SECURITY/TRANSACTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED (trade date)	ORIGINAL OR ADJUSTED COST BASIS*
FIRSTFED FINANCIAL CORP DEL	FED	31	/ /	
			/ /	
FREMONT GENERAL CORP	FMT	65	/ /	
			/ /	
GENLYTE GROUP INC WITH RIGHTS TO PURCHASE PREFRD STK UNDER CERTAIN CIRCUMSTANCE	GLYT	32	/ /	
			/ /	
GUILFORD PHARMACEUTICALS INC	GLFD	222	/ /	
			/ /	
HELEN OF TROY LTD-BERMUDA	HELE	71	/ /	
			/ /	

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REQUEST FOR MISSING COST INFORMATION (CONTINUED)

ACCOUNT NUMBER [redacted]
STATEMENT DATE 12/31/04
REGISTERED REPRESENTATIVE HARRY PILSON 7036640776
PAGE NUMBER 5 of 6

SECURITY/TRANSACTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED (trade date)	ORIGINAL OR ADJUSTED COST BASIS*
HUTCHINSON TECHNOLOGY INC	HTCH	36	/ /	
			/ /	
HOVNANIAN ENTERPRISES INC-CL A	HOV	28	/ /	
			/ /	
INTEGRATED DEVICE TECHNOLOGY WITH RIGHTS TO PURCHASE PREFRD STK UNDER CERTAIN CIRCUMSTANCE	IDTI	106	/ /	
			/ /	
LATTICE SEMICONDUCTOR CORP WITH RIGHTS TO PURCHASE PREFRD STK UNDER CERTAIN CIRCUMSTANCE	LSCC	96	/ /	
			/ /	
MI HOMES INC FORMERLY M I SCHOTTENSTEIN HOMES INC NEW	MHO	31	/ /	
			/ /	

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REQUEST FOR MISSING COST INFORMATION (CONTINUED)

ACCOUNT NUMBER [redacted]
STATEMENT DATE 12/31/04
REGISTERED REPRESENTATIVE HARRY PILSON 7036840776
PAGE NUMBER 6 of 8

SECURITY/TRANSACTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED (trade date)	ORIGINAL OR ADJUSTED COST BASIS*
MEDAREX INC	MEDX	220	/ /	
			/ /	
METHANEX CORP	MEOH	171	/ /	
			/ /	
PACIFICARE HEALTH SYSTEMS INC DEL	PHS	42	/ /	
			/ /	
R&G FINANCIAL CORP-CL B	RGF	53	/ /	
			/ /	
RADIAN GROUP INC	RDN	31	/ /	
			/ /	

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REQUEST FOR MISSING COST INFORMATION (CONTINUED)

ACCOUNT NUMBER [redacted]
STATEMENT DATE 12/31/04
REGISTERED REPRESENTATIVE HARRY PILSON 7035640776
PAGE NUMBER 7 of 8

SECURITY/TRANSACTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED (trade date)	ORIGINAL OR ADJUSTED COST BASIS*
SANDERSON FARMS INC WITH RIGHTS TO PURCHASE PREFRD STK UNDER CERTAIN CIRCUMSTANCE	SAFM	22	/ /	
			/ /	
SPSS INC	SPSS	63	/ /	
			/ /	
TEEKAY SHIPPING CORP MARSHALL ISLAND	TK	51	/ /	
			/ /	
TOLL BROTHERS INC	TOL	40	/ /	
			/ /	
U S CONCRETE INC	RMIX	146	/ /	
			/ /	

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REQUEST FOR MISSING COST INFORMATION (CONTINUED)

ACCOUNT NUMBER [redacted]
STATEMENT DATE 12/31/04
REGISTERED REPRESENTATIVE HARRY PILSON 7035640776
PAGE NUMBER 8 of 8

SECURITY/TRANSACTION	SYMBOL/ CUSIP	QUANTITY	DATE ACQUIRED (trade date)	ORIGINAL OR ADJUSTED COST BASIS*
WORLD ACCEPTANCE CORP-S.C.	WRLD	99	/ /	
			/ /	

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2005 MAY 16 PM 1:51
MC (Office Use Only)

Victor F. SNYDER (Full Name)
1330 Longworth Bldg. (Mailing Address) 202-225-2506 (Daytime Telephone)
Washington D.C.

Filer Status	☒ Member of the U.S. House of Representatives — State: AR District: 2	☐ Officer or Employee — Employing Office:	**A *$200 penalty* shall be assessed against anyone who files more than 30 days late.**
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐	No ☒
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☒	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		May 12, '05

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Name Vic Snyder | Page 2 of 9

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
Quapaw Quarter United Methodist Church/Gen'l. Bd. of Global Ministries UMC	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

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Name Vic Snyder | Page 3 of 9

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2004	$2,000
XYZ Magazine	Article	Aug. 13, 2004	$500
None			

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Name Vic Snyder

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: Dividends	Rent	Interest	Capital Gains	Excepted Trust	Qualified Blind Trust	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E
SP, DC, JT	Examples: SP Mega Corp. Stock					X								X										X								P
	DC Simon & Schuster		Indefinite																	Royalties									X			
	JT 1st Bank of Paducah, KY accounts						X									X										X						
	U.S. Treasury Notes			$		37,000										X								X								S
	Scudder Latin Amer Fund			$		6,377								X								X										
	T. Rowe Price New Asia	X															X							X								S
	T. Rowe Price U.S. Treasury	X												X								X										S
	T. Rowe Price European	X															X						X									S
	Vanguard Treas. Money Mkt.			$		2,475								X								X										S

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Vic Snyder

Page 5 of 9

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Vanguard Total Stock Mkt			$	1	1	1,	8	9	2				X										X								P
	Vanguard Treas. Money Mkt (SEP-IRA)			$		3	4,	4	9	4												N.A. – Retirement										
	Vang. Tot. Stock (SEP-IRA)			$			6,	4	9	9												N.A. – Retirement										
	Amer. Century Prime Money Mkt	X												X								X										S
	Ark. Diamond Deferred Comp			$		4	2,	4	2	5												N.A. – Retirement										
	AIM European Growth (IRA)			$		1	3,	6	2	3												N.A. – Retirement										
	Montgomery Emerg Mkt Wellington (IRA)			$	9,	7	2	4														N.A. – Retirement										
	Dreyfus Founders Money Mkt (IRA)			$	5,	5	5	4														N.A. – Retirement										
	Dreyfus Founders Discovery (IRA)			$	1	7,	6	9	9													N.A. – Retirement										
	Janus Venture			$	1	3,	2	3	5													X										P
SP	Paddington Partners (IRA)					X								(Held by Bank of McKenzie)								N.A. – Retirement										
	Bank of America Checking			$	80,	7	4	9								X						X										

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SCHEDULE IV — TRANSACTIONS

Name Vic Snyder

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-04		X								
	Vanguard Treasury Money Market		X		1/15/04	X									
	Vanguard Treasury Money Market		X		1/22/04	X									
	Amer. Cent. Money Mkt-Prime		X		7/23/04	X									
	Janus Venture	X			Monthly			Auto-Invest #100/month							
	Vang. Total Stock Fund	X			Monthly	X		Auto-Dividend Reinvestment							
	U.S. Treasury Notes		X		11/30/04	X									
					10/31/04	X									
	US Treasury Notes	X	X		6/31/04	X									
	U.S. Treasury Notes		X		1/31/04			X							
	American Century Prime Money Mkt		X		1/30/04	X									
	T. Rowe Price New Asia		X		7/26/04		X								
	T. Rowe Price US Treasury		X		7/26/04	X									
	T. Rowe Price European		X		7/26/04	X									

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Name Snyder | Page 7 of 9

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	None											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
None		

Use additional sheets if more space is required.

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	None						

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
None	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	None	

GPO: 2005 96-729 (mec)

Use additional sheets if more space is required.

VIC SNYDER
2D DISTRICT, ARKANSAS

HOME OFFICE:
3118 FEDERAL BUILDING
700 WEST CAPITOL AVENUE
LITTLE ROCK, AR 72201-3270
(501) 324-5941
TDD (501) 324-5922

Congress of the United States
House of Representatives
Washington, DC 20515–0402

COMMITTEE ON ARMED SERVICES
COMMITTEE ON VETERANS' AFFAIRS

WASHINGTON, DC OFFICE:
1330 LONGWORTH HOUSE OFFICE BUILDING
WASHINGTON, DC 20515–0402
(202) 225–2506
SNYDER.CONGRESS@MAIL.HOUSE.GOV

web: www.house.gov/snyder

HAND DELIVERED

MC

U.S. HOUSE OF REPRESENTATIVES
2005 MAY 26 PM 5:42
OFFICE OF CONGRESSIONAL ETHICS

May 25, 2005

Mr. Jeff Trandahl
Clerk of the House
H 154 Capitol Building
Washington, D.C. 20515

Dear Mr. Trandahl:

Attached hereto please find an amendment to schedules III and IV of my financial disclosure statement for 2004. The information on this addendum regarding my spouse's ministerial pension plans with the General Board of Pension and Health Benefits of the United Methodist Church was inadvertently omitted from my original filing.

Sincerely,

Vic Snyder
Member of Congress

VS:ef

PRINTED ON RECYCLED PAPER

For Calender YEAR 2004

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name Vic Snyder, AR-2

Addendum Page ___ of ___

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."		For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

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	Asset and/or Income Source		Value of Asset (A–L)	Type of Income	Amount of Income (I–XI)	Transaction
SP, DC, JT	Examples: SP Mega Corp. Stock		X	DIVIDENDS	X	P
	Indefinite Simon & Schuster			INTEREST		
	1st Bank of Paducah, KY accounts		X	Royalties	X	
SP	"Ministerial Pension Plan"		X	"Multiple Asset Fund" - Gen'l Bd of Pensions & Health of UMC)	N.A.	P
SP	"Personal Investment Plan"		X	("Multiple Asset Fund" - Gen'l Bd of Pensions & Health of UMC)	N.A.	
SP	"Personal Investment Plan"		X	("Stable Value Fund" - Gen'l Bd of Pensions & Health of UMC)	N.A.	

For additional assets and unearned income, use next page.

LEGISLATIVE RESOURCE CENTER
2005 MAY 26 PM 5:42
U.S. HOUSE OF REPRESENTATIVES

5199

Calendar Year 2004

SCHEDULE IV — TRANSACTIONS

Name Vic Snyder, AR-2 | Addendum Page ___ of ___

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.			Type of Transaction			Date	Amount of Transaction										
SP, DC, JT	Asset		PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:*	Mega Corporation Common Stock	X			10–12–04		X								
SP	"Ministerial Pension Plan" - Multiple Asset Fund		X			9/30/04	X									

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UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A For use by Members, officers, and employees

2005 MAY 11 PM 4:18

HAND DELIVERED (Office Use Only)

Hilda Lucia Solis
(Full Name)

11930 Cherrylee Drive El Monte, CA 91732
(Mailing Address)

(202) 225-5464
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives	State: CA District: 32	☐ Officer Or Employee — Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Hilda L Solis	5/11/05

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SCHEDULE I - EARNED INCOME

Name Hilda Lucia Solis

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Sam's Foreign and Domestic Auto Center	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Hilda Lucia Solis

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	LSW Retirement Account	$15,001 - $50,000	N/A	NONE	
JT	Palm Springs Tennis Club Time Share	$1,001 - $15,000	N/A	NONE	
SP	Sam's Foreign/Domestic Auto Repair	$50,001 - $100,000	N/A	NONE	
JT	State of CA Savings Plan Program	$15,001 - $50,000	N/A	NONE	
JT	Wells Fargo Bank Money Market Account	$50,001 - $100,000	INTEREST	$201 - $1,000	

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SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Hilda Lucia Solis

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
American Legacy Foundation	Jul. 9-12	Wash.,D.C.--Miami--Wash.,DC	Y	N	Y	2 Days

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6

RECEIVED
ARCHIVE RESOURCE CENTER
2005 MAY 16 PM 2:57
(Office Use Only)

MC

5205

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

MARK E. SOUDER
(Full Name)

2427 WINDSONG CT.
(Mailing Address)

FORT WAYNE IN 46804

Daytime Telephone: 202-225-4436 DC. OFFICE

Filer Status: [X] Member of the U.S. House of Representatives — State: IN District: 3rd; [ ] Officer or Employee — Employing Office:

Report Type: [X] Annual (May 15); [ ] Amendment; [ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I **CERTIFY** that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Mark E. Souder	May 15, 2005

HRT-10-05 MON 12:32 FAX NO. P. 02

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Name	MARK E. SOUDER	Page 2 of 9

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,030
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
DIANE K. SOUDER - CONSULTANT / DISCOVERY TOYS	SPOUSE PROPRIETORSHIP	1,380
HISTORIC SOUDERS OF GRABILL	PAYMENTS / PARTNER	17,789
H. SOUDER & SONS, GENERAL STORE	RENT	1,800

For payments to charity in lieu of honoraria, use Schedule II.

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Name MARK E. SOUDER Page 4 of 9

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset (A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000)	Block C: Type of Income (Dividends; Rent; Interest; Capital Gains; Excepted Trust; Qualified Blind Trust; Other: Type of Income (Specify: For Example, Partnership Income or Farm Income))	Block D: Amount of Income (I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000)	Block E: Transaction (P, S, E)
SP, DC, JT — Examples: SP	Mega Corp. Stock	F	Dividends: X	IV	P
DC	Simon & Schuster	Indefinite	Royalties	X	
JT	1st Bank of Paducah, KY account	F	Interest: X	VI	
	1. SOUDERS GENERAL STORE (H. SOUDER + SON) (1/2 undivided int in bldg)	D	Dividends: X	IV–V	
	2. CERTIFICATE OF DEPOSIT. GRAHILL BANK	D	Interest: X	III	

For additional assets and unearned income, use next page.

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MAX NO.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name MARK E. SOVACK

BLOCK A Asset and/or Income Source	SP. DC. JT	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P S E
3. Historic Soulders of Gambit / Partnership INT						X								X						(periodic income)						X						
Activity: Rental																																
Assets: Building																																
Percent ownership: 25%																																
4. Raymond James Trust ACCT					X																											
Applied Materials Inc				X																												
Biogen				X																												
Boeing				X																												
Bristol Myers Squibb				X																												
Callaway Golf				X																												
EMC Corporation				X																												
Intuitive Fibers & Engineering				X																												
Lucent Media				X																												
Steel Dynamics				X																												
Tanger Financial				X																												
Yellowstone Pet				X																												
5. JMMA							X	(approx 449,000)							X																	
(Joint Money Mgmt Acct)																																
Gradell Bank																																
6. Certificate of Deposit				X											X								X									
Gradell Bank																																

This page may be copied if more space is required.

Name	MARK E. SOUDER	Page 2 of 2

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
Int'l Management + Development Institute	Feb 15-22 2004	Wash D.C. - MUNICH - Wash D.C.	Y	Y	Y	2 Days

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Name Mark E. Souder	Page 9 of 9

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board of Directors	Indiana Historic Landmarks Foundation
Board of Directors	Our Country Home
Managing Partner	Historic Souders of Grabill

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

9

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2005 MAY 17 AM 10: 07
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only) MC

MARK E. SOUDER
(Full Name)

2427 WINDSONG CT.
(Mailing Address)

FORT WAYNE IN 46804 — Daytime Telephone: 202-225-4436 D.C. OFFICE

Filer Status	[X] Member of the U.S. House of Representatives	State: IN District: 3rd	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X] No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X] No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Mark E. Souder	May 15, 2005

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SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	DIANE K. SOUDER - CONSULTANT / DISCOVERY TOYS	SPOUSE PROPRIETORSHIP	1,380
	HISTORIC SOUDERS OF EARLVILLE	PAYMENTS / PARTNER	12,789
	H. SOUDER & SONS, GENERAL STORE	RENT	2,800

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2004	$2,000
XYZ Magazine	Article	Aug. 13, 2004	$500

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Name MARK E. SOJOR

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	Examples: SP Mega Corp. Stock					X								X										X								P
	Examples: Simon & Schuster			Indefinite																Royalties									X			
	Examples: 1st Bank of Paducah, KY accounts						X									X										X						
	1. SOJORS GENERAL STORE (M. SOJOR + SON) (1/2 undivided int in bldg)				X										X									X	X							
	2. CERTIFICATE OF DEPOSIT. GRAHILL BANK			X												X							X									

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name MARK E. SOVOCR

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
	3. HISTORIC SUNDORS OF CARGILL / PARTNERSHIP INT	E	RENT; INTEREST (partially income)	VI	
	Activity: Rental				
	Assets: Buildings				
	Percent ownership: 25%				
	4. Raymond James Tax Adv NCLT	G			
	Applied Materials Inc	C			
	Biogen	C			
	Boeing	C			
	Bristol Myers Squibb	C			
	Callaway Golf	C			
	EMC Corporation	C			
	Intercontl Flavors & Fragrances	C			
	Lockheed Martin	C			
	Steel Dynamics	C			
	Tower Financial	C			
	Washington Post	C			
	5. IMMA	F (approx 149,000)	INTEREST		
	(Inherited Money Market Acct)				
	CARGILL BANK				
	6. Certificate of Deposit	C	INTEREST	III	
	Cargill Bank				

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SCHEDULE IV — TRANSACTIONS

Name MARK E. SOUDER

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example.* Mega Corporation Common Stock	X			10–12–04		X								

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

Name	MARK E. SOUDER	Page 2 of 2

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Int'l Management & Development Institute	Feb 15-22 2004	Wash D.C. - MUNICH - Wash D.C.	Y	Y	Y	2 Days

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board of Directors	Indiana Historic Landmarks Foundation
Board of Directors	Our Country Home
Managing Partner	Historic Souders of Grabill

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

Use additional sheets if more space is required.

.K E. SOUDER
3RD DISTRICT, INDIANA

GOVERNMENT REFORM COMMITTEE
SUBCOMMITTEE ON CRIMINAL JUSTICE, DRUG POLICY AND HUMAN RESOURCES
CHAIRMAN

RESOURCES COMMITTEE

SELECT COMMITTEE ON HOMELAND SECURITY

SPEAKER'S DRUG TASK FORCE
CO-CHAIRMAN

Congress of the United States
House of Representatives
Washington, DC 20515

WASHINGTON OFFICE:
2231 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-4436

DISTRICT OFFICES:
E. ROSS ADAIR FEDERAL BUILDING
1300 SOUTH HARRISON STREET, ROOM 2106
FORT WAYNE, IN 46802
(260) 424-3041
(800) 959-3041
FAX: (260) 424-4042

FIRST SOURCE BANK BUILDING
102 WEST LINCOLN AVENUE, SUITE 250
GOSHEN, IN 46526
(574) 533-6802
(800) 969-3041

THE BOATHOUSE
700 PARK AVENUE, SUITE D
WINONA LAKE, IN 46590
(574) 269-1940
(800) 359-3041

www.house.gov/souder

May 23, 2005

The Honorable Jeff Trandahl
Clerk of the House of Representatives
H-154, The Capitol
Washington, DC 20515

MC

Dear Mr. Trandahl:

I am writing to request that I be allowed to amend my 2004 Financial Disclosure Statement. I inadvertently omitted the following information on the Schedule III form:

4.) Raymond James Investment Acct.—Amount of Income –$201- $1,000

5.) IMMA (Individual Money Market Account)—Amount of Income –$1,001-$2,500

Thank you for your assistance with this important matter. Should you require further information or assistance please do not hesitate to contact my Chief of Staff, Renee Howell, at 202-225-4436.

Sincerely,

Mark Souder

Mark Souder
Member of Congress

U.S. HOUSE OF REPRESENTATIVES
2005 MAY 25 PM 3:00
LEGISLATIVE RECORDING DIVISION
HAND DELIVERED

HAND DELIVERED

COOPERATIVE RESOURCES
2005 JUN 14 PM 4:53
U.S. HOUSE OF REPRESENTATIVES

SCHEDULE IV — TRANSACTIONS

Name Mark Sonder

MC

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.			Type of Transaction		Date	Amount of Transaction								
			PURCHASE	SALE	(MO/DAY/YR)	C $15,001 – $50,000		E $100,001 – $250,000		G $500,001 – $1,000,000		I $5,000,001 – $25,000,000		K Over $50,000,000
SP, DC, JT	Asset													
SP	Example:	Mega Corporation Common Stock			10-12-03	X								
	Goodhill Bank Certificate of Deposit			✓	8-23-03	✓								
	Raymond James Dividend Amount				12-12-03									
	Applied Materials													
	Biomet													
	Boeing													
	Bristol Myers Squibb													
	EMC Corporation													
	International Flavors & Fragrances													

This page may be copied if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
2005 MAY 12 PM 2:32
HAND DELIVERED
(Office Use Only)

FORTNEY PETE STARK
(Full Name)

239 CANNON HOB WASHINGTON, DC 20515
(Mailing Address)

2022255065
Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives	State: CA District: 13	☐ Officer Or Employee — Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☑ No ☐	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION – ANSWER EACH OF THESE QUESTIONS

Trusts–	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions–	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION – THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Pete Stark	5/12/05

MC

5222

SCHEDULE I - EARNED INCOME

Name FORTNEY PETE STARK

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
PETE STARK RE-ELECTION COMMITTEE	SPOUSE CONSULTING FEE	N/A

SCHEDULE II - PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

Name FORTNEY PETE STARK

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
HYEALTH CARE CNFERENCE ADMINISTRATORS	SPEECH	FEB 26,2004	$2,000
AMERICAN SOCIETY OF ANESTHESIOLOGISTS	SPEECH	MAY 4,2004	$1,500
AMERICAN ACADEMYOF ORTHOPEDIC SURGEONS	SPEECH	APRIL 30,2004	$1,000

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name FORTNEY PETE STARK

5225

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	RENTAL HOUSE 2ND ST. SE,WASH.,DC	$500,001 - $1,000,000	RENT	$50,001 - $100,000	
	CHAS. SCHWAB CMA VARIOUS	$1,000,001 - $5,000,000	INTEREST	$5,001 - $15,000	
	STARK INVESTMENT CO. NOTE	$15,001 - $50,000	INTEREST	$5,001 - $15,000	S
	US SAVINGS BONDS	$1,001 - $15,000	INTEREST	$201 - $1,000	
	STARBUCKS COM STK	$15,001 - $50,000	DIVIDENDS	NONE	
	VGRIX	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	S

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name FORTNEY PETE STARK

	DODGX	$100,001 - $250,000	DIVIDENDS	$2,501 - $5,000	P
	20TH CENT. GIFT TRUST MUTUAL FUND	$1,001 - $15,000	DIVIDENDS	NONE	
	FRT	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
**	(** STARK INVESTMENT CO.,LLP ASSET-44% INTEREST)	None		NONE	
**	MULTI TENNANT WAREHOUSE,LITTLEFIED DR., SO.San Francisco,CA	$5,000,001 - $25,000,000	RENT	$1,000,001 - $5,000,000	
**	RICHEY OIL CO., TEXAS	$50,001 - $100,000	Other:ROYALTYs specify)	$15,001 - $50,000	P
**	DAMSON OIL CO., TEXAS	$1,001 - $15,000	Other: (Please specify)/ROYALTY	$201 - $1,000	S
**	J.P. STARK NOTE	$50,001 - $100,000	INTEREST	$2,501 - $5,000	P
**	. ENGBERG WIELE NOTE	$15,001 - $50,000	INTEREST	$2,501 - $5,000	S
**	PAPINI-STARK, LLP.	$100,001 - $250,000		NONE	
	GDW COM STK	$15,001 - $50,000	DIVIDENDS	$1 - $200	
**	CD FREMONT BANK FREMONT,CA	$250,001 - $500,000	INTEREST	$5,001 - $15,000	P
**	DCTH COM STK	$50,001 - $100,000		NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name FORTNEY PETE STARK

	DCTH WARRANTS	$1,001 - $15,000		NONE	
**	GLB/A PFD STK	$250,001 - $500,000	DIVIDENDS	$15,001 - $50,000	P
	GLB/A PFD STK	$15,001 - $50,000	DIVIDENDS	$2,501 - $5,000	S
	BED COM STK	$15,001 - $50,000	DIVIDENDS	$5,001 - $15,000	
**	BED COM STK	$250,001 - $500,000	DIVIDENDS	$15,001 - $50,000	P
	JRN COM STK	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	S
	NTE COM STK	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	S
	SCHNITZER STEEL COM STK	$50,001 - $100,000	DIVIDENDS	$1 - $200	S
	VGRIX	$100,001 - $250,000	DIVIDENDS	$5,001 - $15,000	P
**	FORD MTR PFD STK	$100,001 - $250,000	DIVIDENDS	$5,001 - $15,000	PS

SCHEDULE IV - TRANSACTIONS

Name FORTNEY PETE STARK

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
-	STARK INVESTMENT CO. [redacted] (PAID OFF) NOTE	Other PAID OFF	7-1-2004	$100,001 - $250,000
	VGRIX	S	10-27-04	$50,001 - $100,000
	DODGX-DIVIDEND REINVEST+PURCHASES	P	VARIOUS DURING 2004	$50,001 - $100,000
**	RICHEY OIL CO., TEXAS	P	9-7-2004	$15,001 - $50,000
**	DAMSON OIL CO., TEXAS	S	12-28-2004	$1,001 - $15,000
**	J.P. STARK NOTE	P	10-1-2004	$50,001 - $100,000
**	. ENGBERG NOTE W IFLE	S	10-15-2004	[redacted] $15,001 - 50,000
**	CD FREMONT BANK FREMONT,CA	P	2-1-2004	$250,001 - $500,000
**	GLB/A PFD STK	P	9-27-2004	$250,001 - $500,000
	GLB/A PFD STK	S	5-4-2004	$15,001 - $50,000
**	BED COM STK	P	9-24-2004	$250,001 - $500,000
	JRN COM STK	S	9-13-04	$15,001 - $50,000

SCHEDULE IV - TRANSACTIONS

Name FORTNEY PETE STARK

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	NTE COM STK	S	10-26-04	$15,001 - $50,000
	SCHNITZER STEEL COM STK	S	4-6-04	$50,001 - $100,000
	VGSIX	P	10-27-04	$50,001 - $100,000
**	FORD MTR PFD STK	PS	BOT9-27-04 SOLD 10-26-04	$500,001 - $1,000,000

5229

SCHEDULE V - LIABILITIES

Name FORTNEY PETE STARK

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	WELLS FARGO MORTGAGE CO	LOAN ON RENTAL HOUSE 2ND ST., SE-WASH., DC	$250,001 - $500,000
**	CONFEDERATION LIFE INSUANCE CO.	MORTGAGE ON SO. SANFRANCISCO WAREHOUSE	$5,000,001 - $25,000,000
**	RELIASTAR LIFE INSURANCE CO.,REFINANCE CONFEDERATION LIFE LOAN	MORTGAGE ON SO. SAN FRANCISCO WAREHOUSE	$5,000,001 - $25,000,000
**	FREMONT BANK, FREMONT, CA	NOTE	$250,001 - $500,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name FORTNEY PETE STARK

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure–Destination–Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
INTERN'LMGMT.&DEVEL OP. INSTITUTE	FEB14-21	WASH,DC-LONDON-MUNICH-WASH.,DC	Y	Y	Y	4 DAYS

SCHEDULE VIII - POSITIONS

Name FORTNEY PETE STARK

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
PRESIDENT&DIRECTOR	STARK INVESTMENT CO.,INC., FREMONT, CA
PRESIDENT&DIRECTOR	PETE STARK FOUNDATION, FREMONT, CA.

12

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A For use by Members, officers, and employees

HAND DELIVERED

2005 MAY 16 PM 4:13

(Office Use Only) MC

Clifford B. Stearns
(Full Name)

2071 SE 54th Terrace Ocala, FL 34471
(Mailing Address)

352-624-0373
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representative — State: FL, District: 6	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15) ☐ Amendment	☐ Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑ No ☐
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐		**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts--	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Clifford B. Stearns	5-10-05

5233

SCHEDULE I - EARNED INCOME

Name Clifford B. Stearns

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Central Florida Community College	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Clifford B. Stearns

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Alarion Bank Stock	$1,001 - $15,000	None	None	P
	American Express Company	$1,001 - $15,000	Dividends	$1 - $200	N/A
	AmSouth - Mantanza Cut Subdivision Account	$1,001 - $15,000	None	None	N/A
	AmSouth Joint Checking Account	$1,001 - $15,000	Interest	$1 - $200	N/A
DC	Bank of America Checking	$1,001 - $15,000	None	None	N/A
	Campus Credit Union	$1,001 - $15,000	Interest	$1 - $200	N/A

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SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Clifford B. Stearns

DC	Coca-Cola Co	$1,001 - $15,000	Dividends	$1 - $200	N/A
	Congress Federal Credit Union	$15,001 - $50,000	None	None	N/A
	Daimler-Chrysler Corporation	$1 - $1,000	Dividends	$1 - $200	N/A
	First Silver Springs, Inc, a 100% owned C-Corporation in Silver Springs, FL: Cash, mtg receivable, other receivables, investments and debt)	$250,001 - $500,000	Dividends	$50,001 - $100,000	N/A
	First USA Bank Account, NA, Wilmington DE (IRA Asset); This cash was transferred to MSDW Liquid Asset Fund (IRA Asset)	None	None	None	Other
	Harris Corporation	$1,001 - $15,000	Dividends	$1 - $200	N/A
DC	International Business Machines Corp	$1,001 - $15,000	Dividends	$1 - $200	N/A
	Keycorp	$1 - $1,000	Dividends	$1 - $200	N/A
	Mobil-Exxon Corporation	$1,001 - $15,000	Dividends	$1 - $200	N/A
	Morgan Stanley IRA American Opportunities Fund B Mutual Fund	$1,001 - $15,000	None	None	N/A
	Morgan Stanley IRA Daimler-Chrysler AG Stock	$1 - $1,000	Dividends	$1 - $200	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Clifford B. Stearns

Morgan Stanley IRA Dividend Growth Securities B Mutual Fund	$1,001 - $15,000	Dividends & Capital Gains	$1,001 - $2,500	N/A
Morgan Stanley IRA Ford Motor Company Stock	$1,001 - $15,000	Dividends	$1 - $200	N/A
Morgan Stanley IRA Global Dividend Growth Sec B Mutual Fund	$1,001 - $15,000	Dividends	$1 - $200	N/A
Morgan Stanley IRA Health Sciences Trust B Mutual Fund	$1,001 - $15,000	Dividends & Capital Gains	$201 - $1,000	N/A
Morgan Stanley IRA Liquid Asset Fund	$15,001 - $50,000	Dividends	$201 - $1,000	N/A
Morgan Stanley IRA Liquid Asset Fund MM	$1,001 - $15,000	Dividends	$1 - $200	P
Morgan Stanley IRA US Government Securities Tr B Mutual Fund	$1,001 - $15,000	Dividends	$201 - $1,000	N/A
Morgan Stanley IRA Utilities Fund B	$1,001 - $15,000	Dividends	$1 - $200	N/A
Morgan Stanley IRA Visteon Corp Stock	$1 - $1,000	Dividends	$1 - $200	N/A
MSDW Liquid Asset Fund	$50,001 - $100,000	Dividends	$372	N/A
Rental Building (Marina Towers) Alexandria, VA	$250,001 - $500,000	Rent	$15,001 - $50,000	N/A
Rental Building (Marina Towers) Alexandria, VA (continued)	None	Memo: Rent (net of expenses)	$1,001 - $2,500	N/A
Rental Building (Matanza Cut Subdivision) St. Augustine, FL	$500,001 - $1,000,000	Rent	$5,001 - $15,000	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Clifford B. Stearns

	Rental Building (Matanza Cut Subdivision) St. Augustine, FL (continued)	None	Memo: Rent (net of expenses)	None	N/A
	Rental Building (Old Town Gateway Townhouse) Alexandria, VA	$500,001 - $1,000,000	Rent	$5,001 - $15,000	N/A
	Rental Building (Old Town Gateway Townhouse) Alexandria, VA (Continued)	None	Memo: Rent (net of expenses)	None	N/A
	Rental Office; 2950 NE 55th Ave, Silver Springs, FL	$100,001 - $250,000	Rent	$5,001 - $15,000	N/A
	Rental Office; 2950 NE 55th Ave, Silver Springs, FL (continued)	None	Memo: Rent (net of expenses)	$2,501 - $5,000	N/A
	Rental Restaurant; 5545 E. Silver Springs Blvd, Silver Springs, FL	$250,001 - $500,000	Rent	$15,001 - $50,000	N/A
	Rental Restaurant; 5545 E. Silver Springs Blvd, Silver Springs, FL (continued)	None	Memo: Rent (net of expenses)	$15,001 - $50,000	N/A
	Stearns House, Inc. a S-Corp located in Silver Springs, FL (continued)	None	Ordinary Income from an S-Corp	None	N/A
	Stearns House, Inc. a S-Corp located in Silver Springs, FL, 100% Interest in Cash and Debt	$50,001 - $100,000	Dividends	$201 - $1,000	N/A
	T Rowe Price Emerging Markets	$1,001 - $15,000	Dividends	$201 - $1,000	N/A
	T Rowe Price Equity Index	$15,001 - $50,000	Dividends	$201 - $1,000	N/A
	T Rowe Price High Yield	$15,001 - $50,000	Dividends	$1,001 - $2,500	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Clifford B. Stearns

	T Rowe Price Media & Telecom	$1,001 - $15,000	None	None	N/A
	T Rowe Price New Horizons	$1,001 - $15,000	None	None	N/A
	T Rowe Price Science and Technology	$1,001 - $15,000	None	None	N/A
	T Rowe Price SEP IRA Summit Cash Reserves	$15,001 - $50,000	Dividends	$201 - $1,000	P
	T Rowe Price Spectrum Income	$1,001 - $15,000	Dividends & Capital Gains	$201 - $1,000	N/A
	T Rowe Price Summit Cash Reserves	$1,001 - $15,000	Dividends	$1 - $200	N/A
DC	Trust: T Rowe Price Dividend Growth	$1,001 - $15,000	Dividends	$1 - $200	N/A
DC	Trust: T Rowe Price Emerging Markets Bond	$1,001 - $15,000	Dividends	$1 - $200	N/A
DC	Trust: T Rowe Price Equity Index 500	$15,001 - $50,000	Dividends	$201 - $1,000	N/A
DC	Trust: T Rowe Price High Yield	$1,001 - $15,000	Dividends	$201 - $1,000	N/A
DC	Trust: T Rowe Price Key Corp Stock	$1,001 - $15,000	Dividends	$201 - $1,000	N/A
DC	Trust: T Rowe Price MidCap Growth	$1,001 - $15,000	Capital Gains	$1 - $200	N/A
DC	Trust: T Rowe Price Prime Reserve	$1,001 - $15,000	Dividends	$1 - $200	N/A
DC	Trust: T Rowe Price Spectrum Growth	$1,001 - $15,000	Dividends	$1 - $200	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Clifford B. Stearns

DC	Trust: T Rowe Price Spectrum Income	$1,001 - $15,000	Dividends & Capital Gaines	$201 - $1,000	N/A
DC	Trust: T Rowe Price Suntrust Bank Money Market	$1,001 - $15,000	Interest	$1 - $200	N/A
DC	Trust: Vanguard Star Fund	$1 - $1,000	Dividends	$1 - $200	N/A
	Vanguard Asset Allocation Fund	$1,001 - $15,000	None	None	N/A

SCHEDULE IV - TRANSACTIONS

Name Clifford B. Stearns

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Alarion Bank Stock (500 Shares)	P	11/29/04	$1,001 - $15,000
	Morgan Stanley IRA Liquid Asset Fund (Additional Purchase)	P	4/15/04	$1,001 - $15,000
	TRP Summit Cash Reserve (SEP IRA)	P	3/15/04	$15,001 - $50,000
	First USA Bank Account, NA, Wilmington DE (IRA Asset); This cash was transferred to MSDW Liquid Asset Fund (IRA Asset)	Other	4/15/2004	$1,001 - $15,000

SCHEDULE V - LIABILITIES

Name Clifford B. Stearns

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Washington Mutual, Northridge, CA	Mortgage on Rental Bldg. - Marina Towers Mortgage	$50,001 - $100,000
	Bank of America Morgtage, Charlotte, NC	Mortgage on Old Town Gateway Rental Apartment, Alexandria, VA	$100,001 - $250,000
	Dovenmuehle Morgtage, Inc. Servicer for AmSouth Bank, Schaumburg, IL	Mortgage on Mantanza Cut Rental Home, St. Augustine, FL	$250,001 - $500,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Clifford B. Stearns

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Awakening, Inc.	1/9 - 1/10	Ocala - Sea Island, GA - Ocala	Y	Y	Y	N
Association of American Railroads	1/16 - 1/19	Jacksonville - San Diego - DC (Congressman Stearns); Jacksonville - San Diego - Jacksonville (Son - Bundy)	Y	Y	Y	N
Edison Electric Institute	2/15 - 2/16	Ocala - Orlando - Ocala	Y	Y	Y	N
American Israeli Public Affairs Committee (AIPAC)	10/24 - 10/25	Ocala - Hollywood - Orlando	Y	Y	N	N

SCHEDULE VIII - POSITIONS

Name Clifford B. Stearns

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
President	First Silver Springs, Inc.
President	Stearns House, Inc.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

MAY 13 2005

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LEGISLATIVE RESOURCE CENTER
2005 MAY 23 AM 11: 32
MC
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only)

Ted Strickland
(Full Name)

320 N Market Street
(Mailing Address)

Lisbon, OH 44432

Daytime Telephone: 202-225-5705

Filer Status	☑ Member of the U.S House of Representatives — State: OH District: 6	☐ Officer or Employee	Employing Office
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☑
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☑	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☑
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☑	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☑
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☑	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Ted Strickland	May 13, 2005

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Name Ted Strickland | Page 2 of 4

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Smith Educational Enterprises, Inc.	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name Ted Strickland

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B: None	$1 – $1,000	$1,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $250,000	$250,001 – $500,000	$500,001 – $1,000,000	$1,000,001 – $5,000,000	$5,000,001 – $25,000,000	$25,000,001 – $50,000,000	Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other: Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: None	$1 – $200	$201 – $1,000	$1,001 – $2,500	$2,501 – $5,000	$5,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $1,000,000	$1,000,001 – $5,000,000	Over $5,000,000	Block E: P, S, E
SP, DC, JT	Examples:	SP	Mega Corp. Stock				X								X										X								P
			Simon & Schuster			Indefinite															Royalties									X			
			1st Bank of Paducah, KY accounts					X									X										X						
Jt	National City Bank-Savings					X											X							X									
	IRA- National City Bank					X											X								X								
SP	Smith Educ. Enter., Inc.						X														Royalties				X								

For additional assets and unearned income, use next page.

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Name Ted Strickland | Page 4 of 4

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Project Interchange – American Jewish Committee	Nov. 6-12	Wash, DC – Amman, Jordan Tel-Aviv, Israel	Y	Y	N	N

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HAND DELIVERED

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A — For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
2005 MAY 11 PM 12: 04
HOUSE OF REPRESENTATIVES

MC

(Name) Bartholomew (Bart) T. Stupak

(Mailing Address) W-5499 48th Ave Menominee, MI 49858

(Daytime Telephone) 202/225-4735

(Office Use Only)

Filer Status	☑ Member of the U.S. House of Representatives — State: MI, District: 01	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts--	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Bart T. Stupak	5/11/05

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SCHEDULE I - EARNED INCOME

Name Bartholomew (Bart) T. Stupak

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
State of Michigan - state Police Pension	Disability Retirement Pension	$17,889.69
Stupak for Congress	Spouse Salary	NA

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Bartholomew (Bart) T. Stupak

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the catagory of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	Bart T. Stupak, PC (stock in inactive law practice, 817 Ninth Ave, Menominee, MI)	$1,001 - $15,000	NA	NONE	
JT	Office - 817 Ninth Ave, Menominee MI	$50,001 - $100,000	Rent	$5,001 - $15,000	
DC	Savings Account - Northern Michigan National Bank	$1,001 - $15,000	Interest	$201 - $1,000	
JT	Home - Lots 3 & 4 - 4101 Michigan Shores Drive, Menominee, MI 49858	$250,001 - $500,000	/RENT	$201 - $1,000	
JT	Principal Residence W5499 48th Ave Menominee Township, MI 49858	$500,001 - $1,000,000	NA	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Bartholomew (Bart) T. Stupak

SP	Stephenson National Bank	$1,001 - $15,000	IRA (not self directed, certificate of deposit)	NONE	

SCHEDULE IV - TRANSACTIONS

Name Bartholomew (Bart) T. Stupak

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	Stephenson National Bank	P	04-06-04	$1,001 - $15,000

SCHEDULE V - LIABILITIES

Name Bartholomew (Bart) T. Stupak

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
JT	Stephenson National Bank	Mortgage - 817 Ninth Ave, Menominee, MI 49858	$15,001 - $50,000
JT	Wells Fargo Bank	Mortgage - Lots 3&4 - 4101 Michigan Shores Drive, Menominee, MI 49858	$100,001 - $250,000
JT	AAA Financial Services	Revolving charge accounts	$15,001 - $50,000
JT	American Bar Association CitiBank	Revolving charge account	$10,001 - $15,000
DC	T.H.E Loan	Student Loan	$50,001 - $100,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Bartholomew (Bart) T. Stupak

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Democratic Leadership Council	03/25 - 03/28	Wash DC - Amelia Island, FL - Wash DC	Y	Y	Y	NA
Keystone Center	2/18- 2/21	Green Bay, WI - Keystone, CO - Green Bay, WI	N	Y	Y	NA

SCHEDULE VIII - POSITIONS

Name Bartholomew (Bart) T. Stupak

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Owner/Director	Bart Stupak, PC

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

2005 MAY 16 PM 5:38

(Office Use Only)

5257

JOHN A. SULLIVAN
(Full Name)

114 Cannon House Office Building Washington, DC 20515
(Mailing Address)

(202) 225-2211
Daytime Telephone

Filer Status ✓ Member of the U.S. House of Representatives — State: OK District: 01 — Officer Or Employee — Employing Office:

Termination Date:

Report Type ✓ Annual (May 15) — Amendment — Termination

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ✓	No
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes	No ✓
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ✓	No
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ✓	No
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes	No ✓
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes	No ✓
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes	No ✓
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes	No ✓
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes	No ✓

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION – ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes	No ✓
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes	No ✓

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and wilfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification

I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.

Signature of Reporting Individual: John Sullivan

Date (Month, Day, Year): 5-16-05

SCHEDULE I - EARNED INCOME

Name JOHN A. SULLIVAN

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Judy M. Sullivan Consulting	Spouse Income	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name JOHN A. SULLIVAN

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
Stock - Bank of Oklahoma	$15,001 - $50,000	DIVIDENDS	NONE	S
Valley National Bank Money Market	$15,001 - $50,000	INTEREST	NONE	

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SCHEDULE IV - TRANSACTIONS

Name JOHN A. SULLIVAN

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Stock - Bank of Oklahoma (sale of partial holdings)	S	5-10-04	$1,001 - $15,000

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

3 ... LEGISLATIVE RESOURCE CENTER
2005 MAY 16 PM 6:17
MC
(Office Use Only)

John E. Sweeney
(Full Name)

5 Plantation Crest
(Mailing Address)

(202) 225-5614
Daytime Telephone

Clifton Park NY 12065

Filer Status	[X] Member of the U.S. House of Representatives — State: New York District: 20th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [ ]	No [X]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	John E Sweeney	5-16-05

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Name John E. Sweeney | Page 2 of 3

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Powers Crane & Company	Spouse Salary	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name: John E. Sweeney

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Transaction P, S, E
Examples: SP	Mega Corp. Stock					X								X										X								P
	Simon & Schuster		Indefinite																	Royalties								X				
	1st Bank of Paducah, KY accounts						X									X									X							
	State Employees FCU			X																		X										N/A
SP	Creative Consulting		X													X				Commissions							X					N/A
	PO Box 551, Clifton Park																															
	NY 12065																															
	Fundraising DBA																															

For additional assets and unearned income, use next page.

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2005 MAY 10 PM 3:01
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only) MC

Thomas Gerard Tancredo
(Full Name)

5471 S. Estes St
Littleton CO 80123
(Mailing Address)

Daytime Telephone 303-932-6521

Filer Status	[X] Member of the U.S. House of Representatives	State: District:	[ ] Officer or Employee — Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Tom Tancredo	5-3-05

5264

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Public Employees Retirement Assn.	Retirement Income	30,000

For payments to charity in lieu of honoraria, use Schedule II.

Name [illegible]

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B												Block C							Block D											Block E
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	SP	Mega Corp. Stock					X								X										X								P
DC	*Examples:*	Simon & Schuster		Indefinite																	Royalties									X			
JT		1st Bank of Paducah, KY accounts						X									X									X							
		AgileGroup – managed by Greenberg & Ass.								X																							
		Jeffco Credit Union			X												X						X										

For additional assets and unearned income, use next page.

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Cardinal Mindszenty Fdtn.	April 23-24	Wash D.C. - L.A. - D.C	Y	Y	N	N
	FAIR	June 3-4	Wash. D.C. - Phoenix - D.C.	Y	Y	N	N
	Airbus	Aug 15-24	Wash D.C. - Toulouse - D.C	Y	Y	Y	Y

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Chairman	Team America

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2005 98-729 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2005 MAY 13 PM 3:02
MC
(Office Use Only)

JOHN S. TANNER
(Full Name)

1226 LONGWORTH HOUSE OFFICE BLDG. 202-225-4714
(Mailing Address) Daytime Telephone:

WASHINGTON, D.C. 20515

Filer Status	☒ Member of the U.S. House of Representatives	State: TENN District: 8	☐ Officer or Employee	Employing Office
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☒	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5/13/05

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SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	UNION CITY INSURANCE (FAMILY OWNED BUSINESS)	FEE	8250.00
	STATE OF TENNESSEE RETIREMENT	PENSION	11,023.80
	NATIONAL GUARD RETIREMENT	PENSION	4166.40
	UNION CITY INSURANCE	SPOUSE INCOME	
	SHENNANDOAH SHUTTERS	SPOUSE SALARY	
	BETTY ANN TANNER ACCESSORIES	SPOUSE SALARY	

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name JOHN S. TANNER

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

Block A		Block B												Block C							Block D											Block E
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:* Mega Corp. Stock					X								X										X								P
	Simon & Schuster			Indefinite																Royalties									X			
	1st Bank of Paducah, KY accounts						X									X										X						
	(UNION CITY INS.-) WESTAN- STOCK									X											X											
	TANNER FARM- LP								X												X											
	CCA- CORRECTIONS CORP.				X									X									X									
	COMMERCIAL BANK					X										X						X										
	E.B. TANNER ESTATE								X												X											
	FEDERAL NAT. MORT.				X											X								X								

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	SECTOR SEL. HEALTHCARE			X										X								X										
	TIME WARNER, INC.			X																	X											
	WALMART			X										X								X										
	SYGENTA			X																	X											P
	NOKIA			X										X								X										P
	MICROSOFT			X										X									X									
	INTEL			X										X								X										P
	GTX INCORP.			X																	X											P
	FREESCALE SEMICONDUCTOR			X																	X											SPINOFF FROM MOTOROLA
	MOTOROLA				X									X									X									
SP	GENERAL ELECTRIC			X										X								X										
SP	AGERE SYSTEMS - A		X																		X											
SP	AGERE SYSTEMS - B		X																		X											
SP	AVAYA INC.		X																		X											
SP	COCA COLA			X										X								X										
SP	CORRECTIONS CORP.		X											X								X										
SP	PEPSICO			X										X								X										
SP	LUCENT TECHNOLOGIES		X																		X											
SP	MEDTRONIC INC			X										X								X										
SP	MUNDER NET CLASSIC		X											X							X											
SP	CISCO			X										X							X											
SP	PORTIS FAMILY ESTATE					X								X								X										

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JOHN S. TANNER

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	MORGAN KEEGAN IRA				X									X								X									
	ESAT INC	X																			X										
SP	MEAGER MEANS INVT. CLUB			X																	X										
	CORRECTIONS CORP PFD B			X										X								X									

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SCHEDULE IV — TRANSACTIONS

Name JOHN S. TANNER

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–04		X								
	GOVT. NAT. MORTAGE - REDEEMED			X	4-26-04	X									
	NASDAQ 100 TRUST		X		7-1-04	X									
	UNION PLANTERS CORP.		X		3-8-04	X									
	SECTOR SELECT UTILITIES		X		12-3-04	X									
	GTX INCORP.	X			3-25-04	X									
	GTX INCORP.	X			4-26-04	X									
	NOKIA	X			7-29-04	X									
	INTEL	X			5-3-04	X									
	SYNGENTA ADR	X			12-3-04	X									
	ESAT INC - BUSINESS CLOSED - WENT OUT OF BUSINESS														

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	ELECTRONIC INDUSTRY ASSN.	1/28-30	DC-WEST PALM BEACH-DC	Y	Y	Y	N
	CONSERVATION INTERNATIONAL	1/8-19	DC-MADAGASCAR-SOUTH AFRICA-DC	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
PRESIDENT	WESTAN INSURANCE AGENCY (FAMILY OWNED BUSINESS)
PARTNER	TANNER FARMS LP

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2005 98-729 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED
7
2005 MAY 16 PM 4:47
MC

Rep. Ellen Tauscher
(Full Name)
2121 North California Blvd. Suite 555
(Mailing Address)
Walnut Creek, CA 94596
202-225-1880
Daytime Telephone

(Office Use Only)

Filer Status	☑ Member of the U.S. House of Representatives — State: CA District: 10	☐ Officer or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐	No ☑
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☑
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑	No ☐
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑	No ☐
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☑
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑	No ☐
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑	No ☐
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☑

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Ellen Tauscher	5/16/05

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Name Rep. Ellen Tauscher | Page 2 of 7

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Examples:	Block A	Block B	Block C	Block D	Block E
SP		Mega Corp. Stock	E: X	DIVIDENDS: X	V: $2,501 – $5,000	P
DC		Simon & Schuster	Indefinite	Other Type of Income (Specify: For Example, Partnership Income or Farm Income): Royalties	IV: $1,001 – $2,500; IX: $100,001 – $1,000,000	
JT		1st Bank of Paducah, KY accounts	F: X	INTEREST: X	VI: $5,001 – $15,000	

Block A	Block B	Block C	Block D	Block E
I SHARES TRUST VALUE MID FUND	C: $1,001 – $15,000	DIVIDENDS: X	II: $1 – $200	
I SHARES TRUST MID CAP GROWTH	C: $1,001 – $15,000	DIVIDENDS: X	II: $1 – $200	
MUNI HOLDINGS CA INS FUND	D: $15,001 – $50,000	INTEREST: X	V: $2,501 – $5,000	
CHASE CHASE DEL CAPITAL CORP	E: $50,001 – $100,000	DIVIDENDS: X	V: $2,501 – $5,000	
DREYFUS STOCK IND FUND	F: $100,001 – $250,000	DIVIDENDS: X	III: $201 – $1,000	
WACHOVIA MONEY MKT ACCT COMMUNO BANK DEPOSIT SWEEP	C: $1,001 – $15,000	INTEREST: X	II: $1 – $200	

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Rep. Ellen Tauscher

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	FOUNTAIN APARTMENTS, LTD 1777 Botelho Dr., SUITE 300 WALNUT CREEK CA 94596					X									X											X					
	OTHER ASSETS (ROUGH ESTIMATE - EXACT VALUE AND LIST OF ASSETS CANNOT BE DETERMINED PENDING DIVORCE PROPERTY SETTLEMENT)									X																					

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SCHEDULE IV — TRANSACTIONS

Name Rep. Ellen Tauscher

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-04		X								
	BLACKROCK MUNI INCOME TRUST		X		1-15-04	X									
	BLACKROCK MUNI INCOME TRUST		X		4-27-04	X									
	BLACKROCK MUNI INCOME TRUST		X		5-25-04	X									
	BLACKROCK MUNI INCOME TRUST		X		5-25-04	X									
	BLACKROCK MUNI INCOME TRUST		X		7-26-04	X									
	BLACKROCK MUNI INCOME TRUST		X		8-25-04	X									
	BLACKROCK CORE BD TR BEN INT		X		1-15-04	X									
	BLACKROCK CORE BD TR BEN INT		X		1-15-04	X									
	ISHARES TRUST MID CAP GR FUND		X		3-11-04	X									
	ISHARES TRUST MID CAP GR FUND		X		3-11-04	X									

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Name Rep. Ellen Tauscher | Page 5 of 7

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	CITIBANK CREDIT CARD	CREDIT CARD	X									

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	DEMOCRATIC LEADERSHIP COUNCIL	MARCH 25-28	WASH DC - Jacksonville - WASH DC	Y	Y	Y	N

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
DIRECTOR (UNPAID, ON LEAVE)	WOMEN'S POLICY LEGACY FOUNDATION
DIRECTOR (UNPAID, ON LEAVE)	ALUMNI RESOURCES
DIRECTOR (UNPAID, ON LEAVE)	CALIFORNIA SYMPHONY

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2005 98-729 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED
LEGISLATIVE RESOURCES CENTER
2005 MAY 16 PM 2:29
(Office Use Only)

Charles H. Taylor
(Full Name)

339 Cannon House Office Building Washington, DC 20515
(Mailing Address)

202-225-6401
Daytime Telephone:

Filer Status ☑ Member of the U.S. House of Representative — State: NC District: 11 — ☐ Officer Or Employee — Employing Office:

Report Type ☑ Annual (May 15) ☐ Amendment ☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐ No ☑	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Charles H. Taylor	05/16/05

5284

SCHEDULE I - EARNED INCOME

Name Charles H. Taylor

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Financial Guaranty Corporation	Spouse Director's Fee	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Charles H. Taylor

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	104 North Liberty Street, Asheville, NC	$100,001 - $250,000	NONE	NONE	
	BB&T Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	Blue Ridge Savings Bank, Savings Accounts, Asheville, NC	$1,000,001 - $5,000,000	INTEREST	$50,001 - $100,000	
	Cedar Creek Farms Partnership: Note Receivable from Thompson et al.	$1,001 - $15,000	DIVIDENDS	$5,001 - $15,000	
	Financial Guaranty Corporation, Stock, Asheville, NC	Over $50,000,000	NONE	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Charles H. Taylor

	Gaybo Company Partnership	$100,001 - $250,000	CAPITAL GAINS	$15,001 - $50,000	
	IRA Blue Ridge Savings Bank	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Major Land and Timber Partnership, Haywood County NC	$1,000,001 - $5,000,000	None	NONE	
	McCrae Insustries stock	$1 - $1,000	DIVIDENDS	$1 - $200	
	Riverside Company Estates Partnership, Brevard, NC	$1,001 - $15,000	NONE	NONE	
SP	Southeastern Real Estate and Discount, Brevard NC	$500,001 - $1,000,000	RENT	$100,001 - $1,000,000	
	Summit Bank stock, Greenville, SC	$1,001 - $15,000	NONE	NONE	
JT	Taylor Family Trust (farm in Transylvania County, NC)	$1,000,001 - $5,000,000	NONE	NONE	
	The South Financial Group stock	$100,001 - $250,000	DIVIDENDS	$1,001 - $2,500	
	Monte Vista Corporation Stock	$1,000,001 - $5,000,000		NONE	
	NC State Employees Pension Fund	$1,001 - $15,000	NONE	NONE	
	Shares in Bank of Ivanovo -- Held individually until transfer to Financial Guaranty Corporation approved by Russian government	$1,000,001 - $5,000,000	NONE	NONE	

SCHEDULE VIII - POSITIONS

Name Charles H. Taylor

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Chairman (uncompensated)	Blue Ridge Savings Bank, Asheville, NC
Vice Chairman (uncompensated)	Financial Guaranty Corporation, Asheville, NC

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

MAY 13 2005

LEGISLATIVE RESOURCE CENTER
2005 MAY 20 PM 12:35
MC
(Office Use Only)

GARY EUGENE "GENE" TAYLOR
(Full Name)

814 N. BEACH BLVD.
(Mailing Address)
BAY ST. LOUIS MS 39520

Daytime Telephone
202-225-5772
228-466-3933

Filer Status	☑ Member of the U.S. House of Representatives	State: MS District: 04	☐ Officer or Employee	Employing Office
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☑
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☑	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☐	No ☑	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☑
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☑
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑	No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month Day Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Gene Taylor	5-13-05

5289

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	SOUTHERN GRAPHICS	SPOUSE sales commission	NA
	Gene Taylor for Congress Committee to Margaret Taylor	salary - campaign manager	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name GARY EUGENE "GENE" TAYLOR | Page 3 of 4

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
JT	Hancock Bank	personal loan		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	American Shipbuilding Assn.	NOV 30-DEC 2	Gulfport, MS-Fort Myers, FL - Gulfport, MS	Y	Y	N	N

This page may be copied if more space is required.

GENE TAYLOR
4TH DISTRICT, MISSISSIPPI

COMMITTEE ON ARMED SERVICES

COMMITTEE ON TRANSPORTATION AND INFRASTRUCTURE

http://www.house.gov/genetaylor

Congress of the United States
House of Representatives
Washington, DC 20515–2404

2311 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515–2404
(202) 225-5772

DISTRICT OFFICES

2424 14TH STREET
GULFPORT, MS 39501
(228) 864-7670

701 MAIN STREET
SUITE 215
HATTIESBURG, MS 39401
(601) 582-3246

1314 GOVERNMENT STREET
OCEAN SPRINGS, MS 39564
(228) 872-7950

527 CENTRAL AVENUE
LAUREL, MS 39440
(601) 425-3905

mc

June 15, 2005

LEGISLATIVE RESOURCE CENTER
2005 JUN 15 PM 1:09
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

The Honorable Jeff Trandahl
Clerk of the U.S. House of Representatives
H-154, The Capitol
Washington, DC 20515

Dear Mr. Trandahl:

It has been brought to my attention that I inadvertently failed to answer Question IV under the Preliminary Information section of my Financial Disclosure Statement for Calendar Year 2004. The "NO" box should have been checked. I am requesting that you make the change to my official statement on my behalf.

I regret the omission, and thank you in advance for your attention to this matter. If you have any questions or concerns, please contact me at (202) 225-5772 or contact my campaign manager, Mrs. Margaret Taylor, at (228) 466-3933.

Sincerely,

Gene

GENE TAYLOR
Member of Congress

GT:cal

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2005 MAY 16 PM 12:23
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only) MC

Lee R. Terry
(Full Name)

1524 Longworth HOB
(Mailing Address)

Washington D.C. 20515

Daytime Telephone: 202-225-4155

Filer Status	[X] Member of the U.S. House of Representatives — State: NE District: 02	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [ ]

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5-12-05

5294

Name	Lee Terry	Page 2 of 6

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Law Office of Terry Salerno	Residual Legal Fees	$2,045.00

For payments to charity in lieu of honoraria, use Schedule II.

Name Lee Terry | Page 3 of 6

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: Transaction P, S, E
SP, DC, JT	Examples: SP Mega Corp. Stock					X								X										X								P
	Examples: Simon & Schuster		Indefinite																	Royalties									X			
	Examples: 1st Bank of Paducah, KY accounts						X									X									X							
SP JT	Level 3 Stock			X																	X											
	Motorola Inc Stock			X																	X											
	Oracle Corp Stock			X																	X											
	Pinnacle West Corp Stock			X										X								X										
	Qualcomm Inc Stock				X																X											
	U.S. Bancorp Corp Stock			X																	X											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Lee Terry

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	American Express Stock			X																	X											
	Citigroup Inc. Stock				X																X											
	Coca-Cola Stock			X																	X											
	Gillette Co. Stock			X																	X											
	Progressive Corp Stock				X									X								X										
	U.S. Global Nanospace Inc Stock		X	/										/							¥											(P)
	S&T Tax Money Mkt			X																												
	Lincoln Life Ins			X												X						X										
	City of Omaha 414A Pension			X												X						X										
DC	401 Oman Sachs Fund / Incl	T		X																												
DC	401 Oman Sachs Fund / Equity	T		X																												
DC	401 Amon Sachs Fund / Income	T		X																												

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SCHEDULE IV — TRANSACTIONS

Name Lee a. Terry | Page 5 of 6

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-04		X								
	US Global Nanospace Stock	X				X									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
JT	First National Bank	Credit Card	X									

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2005 MAY 20 PM 12:54
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only) MC

LEE R. TERRY
(Full Name)

1524 Longworth HOB
(Mailing Address)

WASHINGTON, D.C. 20515

Daytime Telephone: 202-225-4155

Filer Status	[X] Member of the U.S. House of Representatives	State: NE District: 02	[ ] Officer or Employee	Employing Office:
Report Type	[ ] Annual (May 15)	[X] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [ ]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [ ]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [ ]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [ ]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [ ]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Lee Terry	5/20/05

5300

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Consumer Electronics Association	JAN 8-11, 2004	Phoenix, AZ - Las Vegas - Omaha, NE	Y	Y	Y	N

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✓ *Original* ___ *Amendment*

U.S. House of Representatives

MEMBER/OFFICER TRAVEL DISCLOSURE FORM

This form is for disclosing the receipt of travel expenses from private sources for meetings, speaking engagements, fact-finding trips or similar events in connection with official duties. You need not disclose government-funded or political travel on this form, or travel that is unrelated to official duties. This form does not eliminate the need to report all privately funded travel on the annual Financial Disclosure Statements of those persons required to file them. In accordance with clause 5 of House Rule 25, complete this form and file it with the Clerk of the House of Representatives, B-106 Cannon House Office Building, within 30 days after travel is completed. The Clerk is to make these forms available to the public as soon as possible after they are filed. *Obtain the dollar amounts from the sponsor; if exact dollar amounts are unavailable, provide a good faith estimate.*

Name of Member or Officer (print or type): Congressman Lee Terry

Name of accompanying family member (if any): Mrs. Robyn Terry
Relationship to Member/Officer (check one): ✓ spouse ___ child

Dates of Travel: January 8, 2004 - January 11, 2004

Dates at personal expense: ___

Itinerary (Point of departure – destination – return): Please See Attached

Sponsor (Who paid for the trip): Consumer Electronics Association

Purpose of Trip: Speak on Consumer Education Panel regarding HDTV advancements.

	Total Transportation Expenses	Total Lodging Expenses	Total Meal Expenses
For Member or Officer:	472.00	912.33	540.00
For accompanying spouse or child:	409.50		360.00

	Other expenses (dollar amount)	Nature of expenses (e.g., taxi, parking, registration fee, etc.)
For Member or Officer:		
For accompanying spouse or child:		

I have determined that all of the expenses listed above were necessary and that the travel was in connection with my duties as a Member or Officer of the U.S. House of Representatives and would not create the appearance that I am using public office for private gain.

SIGNATURE OF MEMBER OR OFFICER: ___ DATE: 2-4-04

Version date 4/2003 by Committee on Standards of Official Conduct

LEE TERRY
NEBRASKA, 2ND DISTRICT

WASHINGTON OFFICE
1524 LONGWORTH HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-4155

DISTRICT OFFICE
11717 BURT STREET, SUITE 106
OMAHA, NE 68154
(402) 397-9944

Talk2Lee@mail.house.gov
www.house.gov/terry

Congress of the United States
House of Representatives

HOUSE COMMITTEE ON
ENERGY AND COMMERCE

SUBCOMMITTEES
COMMERCE, TRADE AND
CONSUMER PROTECTION

ENVIRONMENT AND HAZARDOUS
MATERIALS

TELECOMMUNICATIONS
AND THE INTERNET

June 6, 2005

HAND DELIVERED
LEGISLATIVE RESOURCE CENTER
2005 JUN -6 PM 3:43
U.S. HOUSE OF REPRESENTATIVES

MC

The Honorable Jeff Trandahl
Office of the Clerk
U.S. House of Representatives
H154 Capitol

Dear Mr. Trandahl:

The following information is being submitted to amend and clarify my personal financial disclosure statement ("FDS") for calendar year 2004 filed in compliance with House rules on May 16, 2005:

1) On front page of FDS, box indicating "No" for "Exemption" for any liabilities or unearned income for spouse or dependent child should be checked;

2) On Schedule III, "Assets and Unearned Income", (at page "4" of "6"), the specific names of the funds held for my three children designated "601 Dman Sachs Funds" should be listed as "Goldman Sachs Funds, GS Toll keeper, Goldman Sachs Research Fund";

3) For the funds described above, Block D, "Amount of Income", the box "None" should be checked;

4) On Schedule III, the asset listed in Block A "GMAT Han Money Market" should be listed as "Tamarack Invt Fund Prime" and the box "Interest" under Block C "Type of Income" should be checked, and in Block D "Amount of Income", Category II ($1-$200) should be checked;

5) On Schedule IV, "Transactions", the "Date" column should show for the purchase of U.S. Global Nanospace stock: 1600 shares purchased "February 17, 2004"; the column "Amount of Transaction" box "B" ($1001-$15,000) should be checked.

If you, or the Committee on Standards of Official Conduct, need any further information or clarification of my PFD for 2004, please contact my Chief of Staff, Eric Hultman (5/4155).

Sincerely,

LEE TERRY
Member of Congress

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2005 MAY 13 PM 4:01
MC OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only)

William Marshall Thomas
(Full Name)

2208 Rayburn House Office Building, Washington, DC 20515
(Mailing Address)

Daytime Telephone: (202) 225-2915

Filer Status	[X] Member of the U.S. House of Representatives	State: CA District: 22	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [ ]	No [X]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	William M. Thomas	May 13, 2005

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Name	Page 1 of 7
William M Thomas	

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$8,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	N/A		

For payments to charity in lieu of honoraria, use Schedule II.

5306

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2004	$2,000
XYZ Magazine	Article	Aug. 13, 2004	$500
Council of Insurance Agents and Brokers	speech	Feb 9, 2004	$2,000
Tax Executives Institute	speech	March 22, 2004	$2,000
Baker & Hostetler	speech	March 24, 2004	$2,000
American Society of Anesthesiologists	speech	May 05, 2004	$1,500

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Name William M Thomas

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset (A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000)	Block C: Type of Income (DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income))	Block D: Amount of Income (I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000)	Block E: Transaction (P, S, E)
SP, DC, JT — Examples: SP	Mega Corp. Stock	E: $50,001 – $100,000	DIVIDENDS	IV: $1,001 – $2,500	P
	Simon & Schuster	Indefinite	Royalties	IX: $100,001 – $1,000,000	
	1st Bank of Paducah, KY accounts	F: $100,001 – $250,000	INTEREST	VI: $5,001 – $15,000	
	N/A				

For additional assets and unearned income, use next page.

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SCHEDULE IV — TRANSACTIONS

Name William M Thomas

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–04		X								
	N/A														

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5309

Name William M Thomas

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	N/A											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
N/A		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	American Enterprise Institute	Feb 26-27 2004	Wash, DC - Gainesville, VA - Wash, DC	Y	Y	N	N
	American Enterprise Institute and Vail Valley Foundation	June 18-20 2004	Dulles, VA - Avon, CO - Dulles, VA	Y	Y	N	N

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Member of Board	American Council of Young Political Leaders

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	N/A	

GPO: 2005 98-729 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A

For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
2005 MAY 10 PM 4:16
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

MC

(Office Use Only)

Bennie G. Thompson
(Full Name)

103 L. C. Turner Circle Bolton, MS 39041
(Mailing Address)

202-226-5876
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives	State: MS District: 2nd	☐ Officer Or Employee — Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐ No ☑	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief		May 10, 2005

5313

SCHEDULE I - EARNED INCOME

Name Bennie G. Thompson

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
The Pension Board	Spouse Pension	N/A
Town of Bolton Development Corporation	Spouse Salary	N/A
State Of Mississippi	Spouse Retirement Plan	N/A
State of Mississippi	Spouse Deferred Compensation Plan	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Bennie G. Thompson

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "N/A" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Jackson Federal Credit Union	$1,001 - $15,000	INTEREST	$1 - $200	N/A
SP	Jackson Federal Credit Union	$1,001 - $15,000	INTEREST	$1 - $200	N/A
SP	Liberty National Bank (formerly First American Bank) Jackson, MS	$15,001 - $50,000	INTEREST	$201 - $1,000	N/A
SP	Union Planter Bank	$50,001 - $100,000	Interest	$1,001 - $2,500	N/A
	Mississippi State Retirement Plan	$50,001 - $100,000	N/A	NONE	N/A
SP	Mississippi State Retirement Plan	$50,001 - $100,000	N/A	NONE	N/A

5315

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Bennie G. Thompson

SP	Mississippi Deferred Compensation Plan	$15,001 - $50,000	N/A	NONE	N/A
SP	The Pension Boards, United Church of Christ, 475 Riverside Drive, New York, New York 10115	$15,001 - $50,000	N/A	NONE	N/A
SP	Valic Annuity Plan	$50,001 - $100,000	Interest	$1,001 - $2,500	N/A
SP	Equitable Annuity Plan	$15,001 - $50,000	Interest	$1,001 - $2,500	N/A
	Congressional Federal Credit Union	$50,001 - $100,000	INTEREST	$1,001 - $2,500	N/A
JT	Regions Financial (formerly Union Planters) stock	$15,001 - $50,000	Dividends	$1,001 - $2,500	N/A
JT	Lot 1, L. C. Turner Circle, Bolton, MS	$1,001 - $15,000	CAPITAL GAINS	NONE	N/A
JT	Lot 3, L. C. Turner Circle, Bolton, MS	$1,001 - $15,000	CAPITAL GAINS	NONE	N/A
	Dwelling, 212 Sharon Street, Bolton, MS	$15,001 - $50,000	CAPITAL GAINS	NONE	N/A
	2 acres, Northside Drive Bolton, MS	$1,001 - $15,000	CAPITAL GAINS	NONE	N/A
	1 acre, Old Fairground Road Edwards, MS	$1,001 - $15,000	CAPITAL GAINS	NONE	N/A
	1 acre, Mount Olive Road Bolton, MS	$1,001 - $15,000	CAPITAL GAINS	NONE	N/A
SP	Lot 31 Less HGW BLK 7 Mound Bayou, MS (Inheritance)	$1,001 - $15,000	CAPITAL GAINS	NONE	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Bennie G. Thompson

JT	Lot 540, Cottage Grove Subdivision Jackson, MS	$1,001 - $15,000	CAPITAL GAINS	NONE	N/A
JT	3231 & 3233 West Capitol Street Jackson, MS	$100,001 - $250,000	CAPITAL GAINS	NONE	N/A
	Camille Manor Apts, 445 Hooker Street Jackson, MS	$100,001 - $250,000	RENT	$15,001 - $50,000	S

SCHEDULE IV - TRANSACTIONS

Name Bennie G. Thompson

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Camille Manor Apts., 445 Hooker Street, Jackson, MS	S	08/15/04	$100,001 - $250,000

SCHEDULE V - LIABILITIES

Name Bennie G. Thompson

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Trustmark National Bank, MS	Mortgage, 3231 & 3233 Capitol Street	$15,001 - $50,000

SCHEDULE VIII - POSITIONS

Name Bennie G. Thompson

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
President	BLB Properties
Sole Proprietor	Camille Manor Apartments
Trustee	Tougaloo College
Board Member	Housing Assistance Council

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2005 MAY 16 AM 11:14
(Office Use Only)

MC

5321

Mike Thompson
(Full Name)

231 Cannon HOB Washington, DC 20515
(Mailing Address)

202-225-3311
Daytime Telephone

Filer Status: ☑ Member of the U.S. House of Representatives — State: CA — District: 01 ☐ Officer Or Employee — Employing Office:

Report Type: ☑ Annual (May 15) ☐ Amendment ☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? — Yes ✓ No
If yes, complete and attach Schedule I.

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? — Yes No ✓
If yes, complete and attach Schedule II.

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? — Yes ✓ No
If yes, complete and attach Schedule III.

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? — Yes ✓ No
If yes, complete and attach Schedule IV.

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? — Yes ✓ No
If yes, complete and attach Schedule V.

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? — Yes No ✓
If yes, complete and attach Schedule VI.

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? — Yes ✓ No
If yes, complete and attach Schedule VII.

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? — Yes ✓ No
If yes, complete and attach Schedule VIII.

IX. Did you have any reportable agreement or arrangement with an outside entity? — Yes No ✓
If yes, complete and attach Schedule IX.

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes No ✓

Exemptions-- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes No ✓

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and wilfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4 § 104 and U.S.C. § 1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Mike Thompson	5-12-05

SCHEDULE I - EARNED INCOME

Name Mike Thompson

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
St. Helena Hospital	Spouse Salary	n/a
Sojourner Staffing	Spouse Salary	n/a

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Mike Thompson

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	20% Interest, Travis Webb (General Partership) 1590 Webster, Fairfield, CA	$100,001 - $250,000	RENT/INTEREST	$5,001 - $15,000	
SP	Adventist Health Care Retirement Plan	$15,001 - $50,000	DIVIDENDS	NONE	
JT	Bank of America	$50,001 - $100,000	INTEREST	$201 - $1,000	
JT	Caterpillar Inc.	$1,001 - $15,000	DIVIDENDS	NONE	
JT	Citibank	$50,001 - $100,000	INTEREST	$201 - $1,000	
JT	Coca Cola	$1,001 - $15,000	DIVIDENDS	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Mike Thompson

JT	Ecolab Inc.	$1,001 - $15,000	DIVIDENDS	$1 - $200
JT	Edwards Jones Money Market	$1,001 - $15,000	DIVIDENDS	$1 - $200
JT	Exxon Corp.	$1,001 - $15,000	DIVIDENDS	$1 - $200
JT	General Electric	$1,001 - $15,000	DIVIDENDS	$1 - $200
JT	Gillette Co.	$1,001 - $15,000	DIVIDENDS	NONE
JT	GlaxoSmithKline PLC Spons. Adr.	$1,001 - $15,000	DIVIDENDS	NONE
JT	Half Ownership, 1435/1439 Kearney St., St. Helena, CA	$500,001 - $1,000,000	RENT	$5,001 - $15,000
	Insurance Investment Fund Plus	$1,001 - $15,000	DIVIDENDS	NONE
JT	Johnson & Johnson	$1,001 - $15,000	DIVIDENDS	$1 - $200
SP	North Valley Bank Corps (formerly 6 Rivers National Bank)	$1,001 - $15,000	DIVIDENDS	$1 - $200
JT	Oracle Corp.	$1,001 - $15,000	DIVIDENDS	NONE
JT	Ownership of 2140 Finley Road East, Finley, CA	$500,001 - $1,000,000	Other: Farm Income	NONE
JT	Pfizer Ins.	$1,001 - $15,000	DIVIDENDS	$1 - $200
	S&P 500 Equity Fund	$15,001 - $50,000	DIVIDENDS	NONE

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Mike Thompson

JT	Silverado Credit Union	$50,001 - $100,000	INTEREST	$201 - $1,000	
JT	Starbucks	None	DIVIDENDS	NONE	S
	Vanguard Wellington	$15,001 - $50,000	DIVIDENDS	NONE	
JT	Walgreen	$1,001 - $15,000	DIVIDENDS	NONE	
JT	WalMart Stores	None	DIVIDENDS	$1 - $200	S
JT	Washington Mutual Inv. Fund	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$201 - $1,000	
JT	Wells Fargo Bank	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	Wells Fargo Bank	$15,001 - $50,000	INTEREST	$201 - $1,000	

SCHEDULE IV - TRANSACTIONS

Name Mike Thompson

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
JT	Starbucks	S	7/16/04	$1,001 - $15,000
JT	WalMart Stores	S	7/16/04	$1,001 - $15,000

SCHEDULE V - LIABILITIES

Name Mike Thompson

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
JT	American Ag. Credit	Farm Development Loan, 2140 Finley Road, East Finley, CA	$250,001 - $500,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Mike Thompson

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Quail Unlimited	Jan. 22-25, 2004	Washington, D.C. To Albany, GA to Washington, DC	Y	Y	Y	n/a
Congressional Sportsmen'sFoundation	March 21-23, 2004	Washington, D.C. To Duck Key, FL to Washington, D.C.	Y	Y	Y	n/a
The Aspen Institute	May 23-28, 2004	Washington, D.C. To Barcelona, Spain to San Francisco, CA	Y	Y	Y	n/a

SCHEDULE VIII - POSITIONS

Name Mike Thompson

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
General Partner	Travis Webb General Partnership, 5184 Gordon Valley Rd., Suisun, CA

5

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED
LEGISLATIVE RESOURCE CENTER
2005 MAY 13 PM 4:07
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only) MC

William McClellan "Mac" Thornberry (Full Name)	
2457 Rayburn House Office Building Washington, DC 20515-4313 (Mailing Address)	202-225-3706 Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives	State: TX District: 13	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐ No ☑
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	VIII.	Did you hold any reportable positions on or before the date of filing in the current calender year? **If yes, complete and attach Schedule VIII.**	Yes ☑ No ☐
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐ No ☑	IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐		**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION – ANSWER EACH OF THESE QUESTIONS

Trusts–	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions–	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION – THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	William M. Thornberry	05-13-2005

5330

SCHEDULE I - EARNED INCOME

Name William McClellan "Mac" Thornberry

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Embassy of Switzerland	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name William McClellan "Mac" Thornberry

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	1/3 Ownership--Thornberry Brothers Cattle Partnership--Clarendon, Texas	$100,001 - $250,000	Partnership Income	$15,001 - $50,000	
DC	Merrill Lynch Fundamental Growth C Mutual Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Congressional Federal Credit Union accounts	$1,001 - $15,000	INTEREST	$1 - $200	

SCHEDULE V - LIABILITIES

Name William McClellan "Mac" Thornberry

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Amarillo National Bank--Thornberry Brothers	Cattle loan	$50,001 - $100,000
	Hunsaker Trust of Albuquerque, New Mexico--Thornberry Brothers	Real Estate Mortgage--Property in Donley County, Texas	$15,001 - $50,000

SCHEDULE VIII - POSITIONS

Name William McClellan "Mac" Thornberry

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Partner	Thornberry Brothers Cattle--Clarendon, Texas

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A

For use by Members, officers, and employees

(Office Use Only)

5335

William Todd Tiahrt
(Full Name)

2441 Rayburn House Office Building Washington, DC 20515
(Mailing Address)

(202) 225-6216
Daytime Telephone

Filer Status ☑ Member of the U.S. House of Representatives — State: KS District: 4 — ☐ Officer Or Employee — Employing Office:

Report Type ☑ Annual (May 15) ☐ Amendment ☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐ No ☑	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☑ No ☐	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Todd Tiahrt	3/16/05

SCHEDULE II - PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

Name William Todd Tiahrt

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
The W. O. Farber Center	Speech	2/17/04	$500

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name William Todd Tiahrt

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	Intrust Bank: Checking	$1,001 - $15,000	INTEREST	$1 - $200	
JT	Intrust Bank: Maximizer Money Market	$1,001 - $15,000	INTEREST	$1 - $200	
JT	MSDW: Active Assets Money Trust	$1,001 - $15,000	INTEREST	$1 - $200	
JT	Boeing Co	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	Wal Mart Stores Inc	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	Cisco Sys Inc	$1,001 - $15,000	None	NONE	

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SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name William Todd Tiahrt

	MSDW-IRA: Liquid Assets Fund -Money Market	$100,001 - $250,000	INTEREST	$1,001 - $2,500	
	MSDW-IRA: iShares DJ US Basic Mtls Sctr	None	DIVIDENDS	$1 - $200	S
	MSDW-IRA: iShares DJ US Cnsmr Non Cyclcl	None	DIVIDENDS	$1 - $200	S
	MSDW-IRA: iShares DJ US Engy Sctr Indx	None	DIVIDENDS	$1 - $200	S
	MSDW-IRA: iShares DJ US Util Sctr	None	DIVIDENDS	$1 - $200	S
	MSDW-IRA: iShares DJ US Hlthcare Sctr	None	DIVIDENDS	$1 - $200	S
	MSDW-IRA: iShares DJ US Telecomm Sctr	None	DIVIDENDS	$1 - $200	S
	MSDW-IRA: iShares Dow Jns US Fincl Sectr	None	DIVIDENDS	$1 - $200	S
	MSDW-IRA: iShares Dow Jns US Cons Cyclcl	None	DIVIDENDS	$1 - $200	S
	MSDW-IRA: iShares S&P Mid Cap 400 Value	None	DIVIDENDS	$1 - $200	S
	MSDW-IRA: iShares S&P Mid Cap 400 Growth	None	DIVIDENDS	$1 - $200	S
	MSDW-IRA: iShares S&P Small Cap 600 Val	None	DIVIDENDS	$1 - $200	S
	MSDW-IRA: iShares S&P 500 Barra Gr Index	None	DIVIDENDS	$1 - $200	S
	MSDW-IRA: iShares S&P 500 Barra Valu Idx	None	DIVIDENDS	$1 - $200	S

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name William Todd Tiahrt

	MSDW-IRA: Ishares S&P Small Cap 600 Growth	None	DIVIDENDS	$1 - $200	S
	MSDW-IRA: iShares DJ US Indl Sctr	None	DIVIDENDS/1	$1 - $200	S

SCHEDULE IV - TRANSACTIONS

Name William Todd Tiahrt

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	MSDW-IRA: AMEX DJ US Tech Index Fund	S	6/22/04	$1,001 - $15,000
	MSDW-IRA: iShares DJ US Basic Mtls Sctr	S	6/22/04	$1,001 - $15,000
	MSDW-IRA: iShares DJ US Cnsmr Non Cyclcl	S	6/22/04	$1,001 - $15,000
	MSDW-IRA: iShares DJ US Engy Sctr Indx	S	6/22/04	$1,001 - $15,000
	MSDW-IRA: iShares DJ US Hlthcare Sctr	S	6/22/04	$15,001 - $50,000
	MSDW-IRA: iShares DJ US Indl Sctr	S	6/22/04	$1,001 - $15,000
	MSDW-IRA: iShares DJ US Telecomm Sctr	S	6/22/04	$1,001 - $15,000
	MSDW-IRA: iShares DJ US Util Sctr	S	6/22/04	$1,001 - $15,000
	MSDW-IRA: iShares Dow Jns US Fincl Sctr	S	6/22/04	$15,001 - $50,000
	MSDW-IRA: iShares Dow Jns US Con Cyclcl	S	6/22/04	$15,001 - $50,000
	MSDW-IRA: iShares S&P Mid Cap 400 Value	S	6/22/04	$1,001 - $15,000
	MSDW-IRA: iShares S&P Mid Cap 400 Growth	S	6/22/04	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name William Todd Tiahrt

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	MSDW-IRA: iShares S&P Small Cap 600 Val	S	6/22/04	$1,001 - $15,000
	MSDW-IRA: iShares S&P 500 Barra Gr Index	S	6/22/04	$15,001 - $50,000
	MSDW-IRA: iShares S&R 500 Barra Valu Idx	S	6/22/04	$15,001 - $50,000
	MSDW-IRA: iShares S&P Small Cap 600 Growth	S	6/22/04	$1,001 - $15,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name William Todd Tiahrt

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
American Assoc. Of Airport Executives	Jan. 10-17	Wash., DC--Kauai, HI--Wash., DC	Y	Y	Y	N/A
The Heritage Foundation	Jan. 21-23	Wash., DC--Cambridge, MD--Wash., DC	Y	Y	N	N/A
The W. O. Farber Center	Feb. 16-18	Wash., DC--Vermillion, SD--Wichita, KS	N	Y	N	N/A

FOOTNOTES

Name William Todd Tiahrt

Number	Section / Schedule	Footnote	This note refers to the following item
1	Schedule III	MSDW:	Morgan Stanley DW Inc brokerage account
2	Schedule III	MSDW-IRA	Morgan Stanley DW Inc - IRA rollover account
3	Schedule IV	MSDW-IRA	Morgan Stanley DW Inc - IRA rollover account

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

(Office Use Only)

Patrick Joseph Tiberi
(Full Name)

5208 Honeytree Loop West Columbus, OH 43229
(Mailing Address)

614-523-2555
Daytime Telephone:

Filer Status: ☑ Member of the U.S. House of Representative — State: OH — District: 12 — ☐ Officer Or Employee — Employing Office:

Report Type: ☑ Annual (May 15) — ☐ Amendment — ☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐ No ☑	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐ No ☑	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

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EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Patrick J. Tiberi	May 16, 2005

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Patrick Joseph Tiberi

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	2210 & 2212 Tupsfield Rd (with spouse	$100,001 - $250,000	RENT	$5,001 - $15,000	
JT	5596 & 5598 Parkville Rd (with father)	$100,001 - $250,000	RENT	$5,001 - $15,000	
JT	5604 & 5606 Parkville Rd (with father)	$100,001 - $250,000	RENT	$5,001 - $15,000	
JT	Ohio Savings Bank	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
JT	Fifth Third Bank	$1,001 - $15,000	INTEREST	$201 - $1,000	
JT	Amcap Fund	$50,001 - $100,000	DIVIDENDS/CAPITAL GAINS	$201 - $1,000	

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SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Patrick Joseph Tiberi

JT	Income Fund	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
	Investment Co./America	$15,001 - $50,000	DIVIDENDS IRA	NA	
	Ohio Deferred Comp.	$15,001 - $50,000	DIVIDENDS	NA	
	P.E.R.S. Ohio	$15,001 - $50,000	DIVIDENDS	NA	
SP	New Economy Fund	$15,001 - $50,000	DIVIDENDS IRA	NA	
SP	New Economy Fund	$1,001 - $15,000	DIVIDENDS IRA	NA	E
SP	Limited Brands	$1,001 - $15,000	DIVIDENDS	NA	
	Robert W. Baird Co.	$1,001 - $15,000	INTEREST SEP	NA	
JT	Northwestern Mutual Ins.	$50,001 - $100,000	DIVIDENDS	NA	
JT	Ohio Savings Bank	$1,001 - $15,000	INTEREST	NA	
JT	Ohio Tuition Trust	$1,001 - $15,000	DIVIDENDS	NA	
DC	Washington Mutual Coverdell Education IRA	$1,001 - $15,000	DIVIDENDS	NA	

SCHEDULE IV - TRANSACTIONS

Name Patrick Joseph Tiberi

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	New Economy Fund rolled over from McDonald Securities	E	2-1-04	$1,001 - $15,000

SCHEDULE V - LIABILITIES

Name Patrick Joseph Tiberi

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
JT	Fifth Third Bank (with spouse)	Mortgage-2210/12 Tupsfield Rd.	$50,001 - $100,000
JT	Fifth Third Bank (with father)	Mortgage-5604/06 Parkville Rd.	$50,001 - $100,000
JT	Fifth Third Bank (with father)	Mortgage-5596/98 Parkville Rd.	$15,001 - $50,000–Paid Off

SCHEDULE VIII - POSITIONS

Name Patrick Joseph Tiberi

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Trustee	American Red Cross
Board Member	Prevent Blindness America
Board Member	Court Appointed Special Advocates-Franklin County, Ohio

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED
LEGISLATIVE RESOURCE CENTER
2005 MAY 16 PM 1:26
MC
(Office Use Only)

(Full Name)	John F. Tierney
(Mailing Address)	120 Cannon House Office Building Washington, DC 20515
Daytime Telephone:	202-225-8020

Filer Status	☑ Member of the U.S. House of Representatives	State: MA District: 06	☐ Officer Or Employee — Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐ No ☑	VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☑ No ☐	VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☑		**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	John F. Tierney	5-12-05

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SCHEDULE II - PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

Name John F. Tierney

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Cape Ann Forum	Speech	March 21, 2004	$200

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name John F. Tierney

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.		BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	Prime Fund Daily Money	$100,001 - $250,000	INTEREST	$1,001 - $2,500	
JT	Cisco Sys Inc	$15,001 - $50,000		NONE	
JT	Disney Walt Co	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	Freeport McMoran	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
JT	Hewlett Packard Co	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	Nike Inc Class B	$15,001 - $50,000	DIVIDENDS	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name John F. Tierney

JT	Parametric Tech Corp	$1 - $1,000		NONE	
JT	Time Warner Inc	$1,001 - $15,000		NONE	
JT	Verizon Communications	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
JT	Sprint Corp	None	DIVIDENDS	$1 - $200	S
JT	Mass St Wtr Pollutn	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
JT	Mass St Cons Lns	$50,001 - $100,000	INTEREST	$1,001 - $2,500	
JT	Sunair Electronics	None	CAPITAL GAINS	$2,501 - $5,000	S
JT	Talk Realty Trust(1/4 interest) 133 Washington St. Salem,MA	$100,001 - $250,000	RENT	$5,001 - $15,000	
JT	Personal Prom.Note(non-int.)	$50,001 - $100,000	None	NONE	
JT	SB/IRA Money Funds Gov't - Port Class A	$15,001 - $50,000	INTEREST	$201 - $1,000	
JT	SB/IRA Growth and Income Fund-CL A	$15,001 - $50,000	NA	NONE	
JT	SB/IRA-Strips-Tint-US-Treas	$1,001 - $15,000	CAPITAL GAINS	NONE	
JT	Citi Bank NA - Bank Dep. Prog.	$15,001 - $50,000	INTEREST	$201 - $1,000	
SP	Resolution Trust	None	None	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name John F. Tiemey

JT	Wright-Patman Fed.Cr.U.	$15,001 - $50,000	INTEREST	$1 - $200	
JT	Eastern Bank	$1 - $1,000	INTEREST	$1 - $200	
SP	Wright Medical Tech Inc.Shares	None	NA/No	NONE	

SCHEDULE IV - TRANSACTIONS

Name John F. Tierney

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
JT	Sprint Corp (FON)	S	12-29-04	$1,001 - $15,000
JT	Sunair Electronics Inc	S	12-21-04	$1,001 - $15,000
JT	Sprint Corp(PCS)	E	4-23-04	$1,001 - $15,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name John F. Tierney

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Aspen Institute	Feb.17-22	Boston,MA-Cancun, MX-Boston,MA	Y	Y	Y	N/A

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

2005 MAY 16 PM 5:44

(Office Use Only)

Rep. Edolphus Towns
(Full Name)

286 Highland Blvd.
(Mailing Address)

Daytime Telephone: (202) 225-5936

Brooklyn, NY 11207

Filer Status	[X] Member of the U.S. House of Representatives — State: NY District: 10	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [ ]	No [X]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month Day Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	E Towns	5/16/05

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Name Towns, E.	Page ___ of ___

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
Interfaith Medical Center	Spouse Salary	N/A
NYC Board Of Education	Spouse Pension	N/A
First Baptist Church of Glenarden	Approved Religious Service	$2000
Berean Missionary Baptist Church	" "	$300
Brown Memorial Baptist Church	" "	$200
Bridge Street AME	" "	$500
Mt. Sinai Baptist Church	" "	$250
Beulah Churchof the Nazarene	" "	$200

For payments to charity in lieu of honoraria, use Schedule II.

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Name	Towns	Page ___ of ___

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2004	$2,000
Examples: XYZ Magazine	Article	Aug. 13, 2004	$500
N/A			

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Name Towns | Page of ____

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

			Block A	Block B											Block C							Block D											Block E
				A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:*	SP	Mega Corp Stock					X								X										X								P
			Simon & Schuster			Indefinite																Royalties									X			
			1st Bank of Paducah, KY accounts						X									X									X							
	Mutual of America					X												X																
	Prudential Insurance					X										X																		
	NY Municipal Bond Fund					X										X																		
	Wright-Patman FCU					X										X																		
	Queens County Savings						X											X																

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Towns

Page ___ of ___

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	BLOCK E Transaction P. S. E
	Fleet Bank			X												X																
	Bank of America			X												X																

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SCHEDULE IV — TRANSACTIONS

Name Towns | Page ___ of ___

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–04		X								
	N/A														

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Name	Towns	Page ___ of ___

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B	C	D	E	F	G	H	I	J	K
			$10,001–$15,000	$15,001–$50,000	$50,001–$100,000	$100,001–$250,000	$250,001–$500,000	$500,001–$1,000,000	$1,000,001–$5,000,000	$5,000,001–$25,000,000	$25,000,001–$50,000,000	Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Countrywide Home Loan	Mortgage on 4304 Hawksnest Lutz, Fla.				X						
	Washington Mutual	Mort. on 324 Highland Blvd. Brooklyn, NY				X						

SCHEDULE VI — GIFTS

N/A

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

Name Towns	Page ___ of ___

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Nuclear Energy Institute	5/14/04	NY--Louisiana--NJ	N	N	N	N
	Clear Channel Corp.	5/25-27/04	NY---Los Angeles--NY	Y	Y	N	N

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Name Towns	Page ___ of ___

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board Member	Wyckoff Medical Center

SCHEDULE IX — AGREEMENTS N/A

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2005 98-729 (mac)

Use additional sheets if more space is required.

EDOLPHUS "ED" TOWNS
MEMBER OF CONGRESS
10TH DISTRICT, NEW YORK

ENERGY AND COMMERCE
HEALTH
TELECOMMUNICATIONS AND THE INTERNET
COMMERCE, TRADE, AND CONSUMER PROTECTION

GOVERNMENT REFORM
GOVERNMENT EFFICIENCY AND FINANCIAL MANAGEMENT
RANKING MEMBER

Congress of the United States
House of Representatives
Washington, DC 20515–3210

WASHINGTON OFFICE:
SUITE 2232
RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225–5936

BROOKLYN OFFICES:
26 COURT ST., SUITE 1510
BROOKLYN, NY 11242
(718) 855–8018

1110 PENNSYLVANIA AVENUE
STORE 5
BROOKLYN, NY 11207
(718) 272–1175

1670 FULTON STREET
BROOKLYN, NY 11213
(718) 774–5682

2294 NOSTRAND AVENUE
BROOKLYN, NY 11203
(718) 434–7931

MC

May 25, 2005

Committee on Standards of Official Conduct
HT2 Capitol

To Whom It May Concern:

Attached you will find an amended copy of my annual disclosure form. Schedule III was amended to reflect the correction of inadvertent omissions in Schedule III Block D.

Sincerely,

Edolphus "Ed" Towns

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2005 MAY 25 AM 10:32
U.S. HOUSE OF REPRESENTATIVES

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2005 MAY 26 AM 10: 32
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

Rep. Edolphus Towns
(Full Name)

286 Highland Blvd.
(Mailing Address)

Brooklyn, NY 11207

COMMITTEE ON STANDARDS

Daytime Telephone: (202) 225-5936

Filer Status	[X] Member of the U.S. House of Representatives — State: NY District: 10	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	X	
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**		X
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**		X
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**		X
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	X	
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**		X
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	X	
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	X	
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**		X

Attached

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

	Yes	No
TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?		X
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?		X

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	E Towns	5/25/05

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Name Towns, E. | Page ___ of ___

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$8,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Interfaith Medical Center	Spouse Salary	N/A
	NYC Board Of Education	Spouse Pension	N/A
	First Baptist Church of Glenarden	Approved Religious Service	$2000
	Berean Missionary Baptist Church	" "	$300
	Brown Memorial Baptist Church	" "	$200
	Bridge Street AME	" "	$500
	Mt. Sinai Baptist Church	" "	$250
	Beulah Churchof the Nazarene	" "	$200

For payments to charity in lieu of honoraria, use Schedule II.

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Name	Towns	Page ___ of ___

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2004	$2,000
	XYZ Magazine	Article	Aug. 13, 2004	$500
	N/A			

This page may be copied if more space is required.

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Name Towns | Page ___ of ___

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Examples: Mega Corp. Stock					X								X										X								P
DC	Simon & Schuster			Indefinite																Royalties								X				
JT	1st Bank of Paducah, KY accounts						X									X									X							
	Mutual of America			X												X							X									
?	stock in company Prudential Insurance			X										X									X									
	NY Municipal Bond Fund			X										X										X								
	Wright-Patman FCU			X										X								X										
	Queens County Savings				X											X						X										

For additional assets and unearned income

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Towns

Page ___ of ___

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Fleet Bank			X												X						X										
	Bank of America			X												X						X										

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5371

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Name Towns | Page ___ of ___

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-04		X								
	N/A														

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Name	Towns	Page ___ of ___

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Countrywide Home Loan	Mortgage on 4304 Hawksnest Lutz, Fla.				X						
	Washington Mutual	Mort. on 324 Highland Blvd. Brooklyn, NY				X						

no

vacation

pers residence

N/A (not factual property)

SCHEDULE VI — GIFTS

N/A

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required

Name Towns | Page ___ of ___

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Nuclear Energy Institute	5/14/04	NY--Louisiana--NJ	N	N	N	N
	Clear Channel Corp.	5/25-27/04	NY---Los Angeles--NY	Y	Y	N	N

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Name Young	Page ___ of ___

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board Member	Wyckoff Medical Center

SCHEDULE IX — AGREEMENTS N/A

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2005 98-729 (mac)

Use additional sheets if more space is required.

05/25/2005 15:34 FAX 202 225 7392 010

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

13

2005 MAY 16 AM 10:01

MC (Office Use Only)

Michael R. Turner (Full Name)

5815 Stone Lake Drive (Mailing Address) (202) 225-6465 (Daytime Telephone)

Centerville, OH 45429

Filer Status	[X] Member of the U.S. House of Representatives	State: District:	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

	Yes	No
I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	[X]	[ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	[ ]	[X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	[X]	[ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	[X]	[ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	[ ]	[X]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	[ ]	[X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	[ ]	[X]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	[ ]	[X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	[ ]	[X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

	Yes	No
TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	[ ]	[X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	[ ]	[X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Michael R. Turner	

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SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Turner Marketing, Inc.	Spouse Salary	N/A
	Turner Marketing, Inc.	Spouse Business Income	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2004	$2,000
	XYZ Magazine	Article	Aug. 13, 2004	$500
	Not Applicable			

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Asset	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT (Examples)	SP Mega Corp. Stock					X								X										X							P
	Simon & Schuster			Indefinite																Royalties								X			
	1st Bank of Paducah, KY accounts						X									X									X						
SP	Legg Mason Value Trust				X														Simple IRA		X										
SP	Apache Corp (APA)			X										X								X									
SP	Alltel Corp (AT)			X										X								X									
SP	Bank of America (BAC)			X										X								X									
SP	Biomet Inc. (BMET)			X										X								X									S PART

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Michael R. Turner

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	CVS Corp (CVS)			X										X								X										
SP	First Data Corp (FDC)			X										X								X										
SP	Fannie Mae (FNM)	X												X								X										S
SP	Forest Labs (FRX)			X										X								X										S PART
SP	General Electric (GE)			X										X								X										
SP	Intel Bus Mach (IBM)			X										X								X										
SP	INTEL Corp (INTC)			X										X								X										
SP	Johnson & Johnson (JNJ)			X										X								X										
SP	MBNA Corp (KRB)			X										X								X										
SP	Masco Corp (MAS)			X										X								X										
SP	Marsh & McLennon(MMC)	X												X								X										S
SP	Oracle Corp (ORCL)			X										X								X										
SP	Pepsico Inc. (PEP)			X										X								X										
SP	Pfizer Inc. (PFE)			X										X								X										
SP	Proctor & Gamble (PG)			X										X								X										
SP	Staples Inc. (SPLS)			X										X								X										
SP	US Bancorp (USB)			X										X								X										
SP	Viacom Inc. (VIAB)			X										X								X										
SP	AFLAC Inc. (AFL)			X										X								X										P
SP	Cisco Systems (CSCO)			X										X								X										
SP	Royal Dutch (RD)			X										X								X										P
SP	Sysco Corp (SYY)			X										X								X										P

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Michael R. Turner

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
SP	Bank One Savings				X											X						X										
SP	Turner Marketing							X	(net	book				value)						business	s								X			
SP	Union Central Life Ins			X																whole life	X											
DC	College Advantage				X															tuition trust	X											
JT	Bank One Checking			X												X						X										
	AMBAC Financial (ABK)			X										X								X										
	American Intl (AIG)			X										X								X										
	Allstate Corp (All)			X										X								X										
	Amgen Inc. (AMGN)			X										X								X										
	Anheuser Busch (BUD)			X										X								X										
	Cardinal Health (CAH)	X												X								X										S
	Dell Inc (DELL)			X										X								X										
	Electronic Arts (ERTS)			X										X								X										
	First Data Corp (FDC)			X										X								X										
	Gillette (G)			X										X								X										
	General Electric (GE)			X										X								X										
	Home Depot (HD)			X										X								X										
	Block H&R (HRB)			X										X								X										
	Lilly Eli (LLY)			X										X								X										
	Medtronic Inc. (MDT)			X										X								X										
	McGraw-Hill (MHP)			X										X								X										

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Michael R. Turner

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Merck & Co (MRK)			X										X								X										
	Microsoft Corp (MSFT)			X										X								X										
	Nokia Corp (NOK)			X										X								X										
	Pitney Bowes (PBI)			X										X								X										
	Union Pacific (UNP)			X										X								X										
	United Technologies(UTX)			X										X								X										
	Verizon Comm (VZ)			X										X								X										
	Wells Fargo (WFC)			X										X								X										
	Washington Mutual (WM)			X										X								X										
	Exxon Mobile (XOM)			X										X								X										
	3M Company (MMM)			X										X								X										P
	Thrift Savings Plan				X															Def.Ann.	X											
	A&P Dimensions			X																Def.Ann.	X											
	Ohio State PERS				X															Def.Ann.	X											
	Union Central Life			X																Whole Life	X											

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SCHEDULE IV — TRANSACTIONS

Name Michael R. Turner

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-04		X								
SP	Biomet (BMET)		X		02-06-04	X									
SP	Forest Laboratories (FRX)		X		02-06-04	X									
SP	Fannie Mae (FNM)		X		10-13-04	X									
SP	Marsh & MCLennon Co. (MMC)		X		10-18-04	X									
SP	Royal Dutch (RD)	X			02-06-04	X									
SP	Sysco Corp. (SYY)	X			02-06-04	X									
SP	AFLAC (AFL)	X			10-14-04	X									
SP	Cisco Systems (CSCO)	X			10-14-04	X									
	Cardinal Health (CAH)		X		08-12-04	X									
	3M Company (MMM)	X			08-12-04	X									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Not Applicable											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
Not Applicable		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
Not Applicable							

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Not Applicable	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	Not Applicable	

GPO: 2005 98-729 (mac)

Use additional sheets if more space is required.

PREFERRED ACCOUNT

Account: 209-72740
F.A.: 50H

December 31, 2004

LMWW CUSTODIAN
FBO LORI TURNER

Beneficiary Information

Primary Beneficiary	MICHAEL R TURNER	100%

The beneficiary designation contained in our records is reflected above. If this information is incorrect, please notify your Financial Advisor.

IMPORTANT REGULATORY MESSAGE:

Legg Mason Wood Walker, Incorporated ("LMWW") is subject to the requirements of the Securities and Exchange Commission's Uniform Net Capital Rule ("Rule 15c3-1") and the rules of the securities exchanges of which it is a member. LMWW has elected to use the alternative method of computing net capital permitted by Rule 15c3-1, which requires that it maintain minimum net capital of two percent of aggregate debits, as defined. New York Stock Exchange rules stipulate that a member organization may not expand its business, equity capital may not be withdrawn, nor may cash dividends be paid if resulting net capital would fall below specified levels. At October 31, 2004, LMWW had net capital, as defined, of $320,712,000, which exceeded the required net capital of $24,408,000.

A copy of LMWW's consolidated statement of financial condition may be obtained at no cost, by accessing our website at www.leggmason.com or by calling us toll-free 1-877-534-4627.

The 12/31/04 Fair Market Value, in addition to any rollovers, contributions, and recharacterizations processed during the year will be reported to the Internal Revenue Service on form 5498. If you made a rollover, contribution, or recharacterization, you will receive a copy of form 5498 in May. If you have not made your 2004 contribution you have until April 15, 2005 to do so. Please report any discrepancies to your Financial Advisor.

---------- End of Statement For Account 209-72740 ----------

LEGG MASON

Brokerage Account Statement Disclosure

Transaction Date - Cash received or paid and securities received or delivered are shown as of the date of the transaction. Purchases or sales of securities are shown as of the settlement date.

Credit Balances and Free Securities - Any free credit balance represents funds payable to you on demand which, although properly accounted for on our records, are not segregated and may be used in the conduct of business with other clients. All fully paid securities in your account will be delivered to you on demand unless the security is represented only in book entry form. Securities held in your margin account are deliverable upon payment of any indebtedness in your account.

Options Transactions - Commissions and other charges for the execution of options transactions have been included in the trade confirmations. A summary of the information is available at your request.

Reporting Changes or Problems - Please advise us of any material change in your investment objectives or financial situation. If you believe this statement is not correct, or if you have not received securities delivered or checks disbursed as reported on the statement, contact the office servicing your account immediately.

Tax Information - The Tax Equity and Fiscal Responsibility Act of 1982 (TEFRA) requires brokers to report the amount of the proceeds of securities sales in clients' accounts to the Internal Revenue Service (IRS). Accordingly, at the end of each year, we will provide you and the IRS with information detailing reportable transactions.

Securities Pricing - Securities prices used in your portfolio summary are obtained from outside sources and their accuracy is not guaranteed.

The Loan of Your Securities - The securities held in a margin account may be used by us as collateral for up to 140% of the amount of any indebtedness. We may, without notice to you, pledge such securities in our general securities loans carried for the accounts of other clients or use them in making loans or deliveries of securities in the usual course of business.

Margin Interest Charges - Margin interest charges appear on the statement in the month incurred as described to you in our Initial Disclosure Statement. The nature of the charges and the method of computation are included in the statement, which is available at your request.

General and Special Miscellaneous Account - If this is a general margin account and we maintain a Special Miscellaneous Account for you under Section 4 (f) (6) of Regulation T of the Federal Reserve system, this is a combined statement of your general and special miscellaneous account. The permanent record of the special miscellaneous account, as required by Regulation T, is available at your request.

For Your Protection - Legg Mason Wood Walker, Inc. is a member of SIPC, which protects securities customers of its members up to $500,000 (including $100,000 for claims for cash). Explanatory brochure available upon request or at www.sipc.org. Legg Mason provides additional protection ("Excess SIPC") through Customer Asset Protection Company, a licensed New York insurer. Account protection applies when a SIPC member firm fails financially and is unable to meet obligations to securities clients, but it does not protect against losses from the rise and fall in the market value of investments, and does not cover all assets.

Statement Frequency - You can expect to receive a brokerage statement at the end of each quarter, as well as in any month in which brokerage transactions or dividend activity are reported in your account. If your account is fairly active, you may receive a statement every month. If you and your FA make no changes to your portfolio, you will receive statements on a quarterly basis.

Account Service Fees - An annual service fee is charged to inactive accounts to enable us to provide those accounts with services including dividend and interest collection and payment, IRS reporting, securities custody and SIPC coverage. An account transfer fee is charged to accounts that transfer to another brokerage firm or bank.

Premier Account Information - Premier Asset Management Account clients should direct inquiries about Visa or check activity to the Legg Mason Service Center at 800 253-0454 between 8:00 AM and 7:00 PM, Monday through Friday, or 9:00 AM and 1:00 PM on Saturdays. Reports of lost or stolen Visa cards or checkbooks can be made 24 hours a day, and must be made as soon as the loss is discovered.

Risks Associated with Trading Outside of Normal Market Hours

1. The price paid or received may be different from the price paid or received during normal trading hours.
2. The price paid or received may vary between the different market centers that trade securities.
3. Investors may receive partial executions of their orders, or no executions at all.
4. The spread between the "bid" and "ask" price may be wider than the spread during normal market hours.
5. News announcements may have an exaggerated impact on the price of securities.

Financial Statement - A financial statement of Legg Mason Wood Walker, Incorporated is available at your request.

NASD Regulations, Inc. Public Disclosure Program – An investor brochure describing the Public Disclosure is available by calling the National Association of Securities Dealers (NASD), hotline number (800) 289-9999 or through the Web at www.nasdr.com.

Legg Mason Wood Walker, Incorporated
100 Light Street, P.O Box 1476
Baltimore MD 21203-1476
(410) 539-0000
http://www.leggmason.com

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UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

Mark Emery Udall
(Full Name)

4346 Prado Drive Boulder, CO 80303
(Mailing Address)

(303) 650-7820
Daytime Telephone:

(Office Use Only)

Filer Status	☑ Member of the U.S. House of Representatives — State: CO — District: 02	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☑ No ☐

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Mark Udall	6/9/05

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SCHEDULE I - EARNED INCOME

Name Mark Emery Udall

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Sierra Club	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Mark Emery Udall

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for Income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Schwab Money Market Fund	$100,001 - $250,000	INTEREST	$201 - $1,000	PS
	Dell Computer	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	Capital One Financial	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	FPL Group Incorporated (IRA)	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	Vanguard GNMA (IRA)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Dentsply Int. Inc. (IRA)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Mark Emery Udall

	Vanguard High Yield (IRA)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Schwab S/T Bond Market Fund (IRA)	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	Texas Instruments Inc. (IRA)	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Schwab Government Money Fund (IRA)	$1 - $1,000	DIVIDENDS	$1 - $200	
	VALIC Retirement Fund	$100,001 - $250,000	INTEREST	NONE	
	Alexandrite Sands Limited Partnership	$1,001 - $15,000	Other: Father's estate	$1 - $200	
	Kingman Station Limited Partnership	$1,001 - $15,000	Other: Father's estate	$1 - $200	
	Casino Lights Limited Partnership	$1,001 - $15,000	Other: Father's estate	$1 - $200	S
SP	Archstone Smith Trust REIT SBI	$1,001 - $15,000	INTEREST	$201 - $1,000	
SP	Time Warner Inc.	$1,001 - $15,000	INTEREST	$201 - $1,000	
SP	Vanguard GNMA Fund	$15,001 - $50,000	DIVIDENDS	$2,501 - $5,000	
SP	Vanguard High-Yield Corporate Fund	$15,001 - $50,000	DIVIDENDS	$2,501 - $5,000	
SP	Healthcare Realty Trust REIT	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	P
SP	Thornburg Mortgage Inc.	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Mark Emery Udall

SP	Pepsico Incorporated	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	P
SP	Proctor & Gamble	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	P
SP	Washington Mutual Inc.	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	S
SP	Susquehanna Bancshares Inc.	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	S
SP	Schwab Money Market Fund	$50,001 - $100,000	INTEREST	$201 - $1,000	
SP	Schwab Money Market Fund (IRA)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	Vanguard GNMA Fund (IRA)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	Vanguard High-Yield Corporate Fund (IRA)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	Adobe Systems Inc. (IRA)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	Applied Materials Inc. (IRA)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	Forest Laboratories (IRA)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	S
SP	Mentor Corporation Minn (IRA)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	National City Corp. (IRA)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	ICOS Corp. (IRA)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	S

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Mark Emery Udall

SP	Johnson & Johnson (IRA)	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	Schwab S/T Bd Mkt Fund (IRA)	$1,001 - $15,000	DIVIDENDS	$1 - $200	PS
SP	Respironics (IRA)	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
SP	Teva Pharm Inds LTD ADRF (IRA)	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
SP	Medtronic (IRA)	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
SP	Patterson Companies (IRA)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	Pfizer, Incorporated (IRA)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	Sun Microsystems Inc. (IRA)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	Xilinx Inc. (IRA)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	Schwab Money Market Fund (SEP IRA)	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	Onthofix Intl (IRA)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	S
SP	Schwab STT BD Market Fund (SEP IRA)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	PS
DC	Schwab Government Money Market Fund	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
DC	Vanguard GNMA Fund	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Mark Emery Udall

DC	Vanguard High-Yield Corporate Fund	$1,001 - $15,000	DIVIDENDS	$1,001 - $2,500	
DC	Kimberly-Clark Corp.	$1 - $1,000	DIVIDENDS	$201 - $1,000	
DC	North Fork Bancorp. Inc.	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
DC	Washington Mutual Inc.	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
DC	Equity RESIDL PPTY Trust	$1,001 - $15,000	CAPITAL GAINS/DIVIDENDS	$1 - $200	
DC	Health Care PPTY Inc.	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
DC	Health Care REIT Inc.	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
DC	Health Care Realty Trust REIT	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
DC	Wash Real Est Inv Tr Sbi	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
DC	Vornado Realty Trust REIT	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
DC	Schwab S/T BD Market Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	PS
DC	Adobe Systems Inc.	$1,001 - $15,000	DIVIDENDS	$1 - $200	
DC	Schwab Government Money Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	
DC	Vanguard GNMA Fund	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Mark Emery Udall

DC	Vanguard High-Yield Corporate Fund	$1,001 - $15,000	DIVIDENDS	$1,001 - $2,500	
DC	Bank of America Corp.	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
DC	McGraw-Hill	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	P
DC	Kimberly-Clark Corp.	$1 - $1,000	DIVIDENDS	$1 - $200	
DC	The Southern Company	$1,001 - $15,000	DIVIDENDS	$1 - $200	
DC	Patterson Dental	$1,001 - $15,000	DIVIDENDS	$1 - $200	S
DC	Johnson & Johnson	$1,001 - $15,000	DIVIDENDS	$1 - $200	
DC	ICOS Corp.	$1,001 - $15,000	DIVIDENDS	$1 - $200	S
DC	Health Care PPTY INV INC REIT	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
DC	Health Care REIT Inc.	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$201 - $1,000	
DC	Healthcare Realty Trust	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
DC	Mylan Laboratories Inc.	$1,001 - $15,000	DIVIDENDS	$1 - $200	S
DC	National City Corp.	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
DC	National Fuel Gas Co.	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Mark Emery Udall

DC	Pfizer Incorporated	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
DC	Proctor & Gamble	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	P
DC	Pepsico	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	P
DC	Sysco Corporation	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	Progress Energy (formerly Carolina Power & Light)	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
SP	Fox Family Limited Partnership	$250,001 - $500,000	INTEREST	$201 - $1,000	

SCHEDULE IV - TRANSACTIONS

Name Mark Emery Udall

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Schwab Money Market Fund	PS	monthly	$1,001 - $15,000
	FPL Group Incorporated (IRA)	P	11-17-04	$1,001 - $15,000
	Schwab S/T Bond Market Fund (IRA)	P	1-10-04	$1,001 - $15,000
	Casino Lights Limited Partnership	S	6-15-04	$1,001 - $15,000
SP	Healthcare Realty Trust REIT	P	4-7-04	$1,001 - $15,000
SP	Thornburg Mortgage Inc.	P	11-17-04	$1,001 - $15,000
SP	Pepsico Incorporated	P	11-17-04	$1,001 - $15,000
SP	Proctor & Gamble	P	11-17-04	$1,001 - $15,000
SP	Washington Mutual Inc.	S	11-17-04	$1,001 - $15,000
SP	Susquehanna Bancshares Inc.	S	11-17-04	$1,001 - $15,000
SP	Forest Laboratories (IRA)	S	11-17-04	$1,001 - $15,000
SP	ICOS Corp. (IRA)	S	6-25-04	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name Mark Emery Udall

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	Schwab S/T Bd Mkt Fund (IRA)	PS	11-17-04 6-25-04	$1,001 - $15,000
SP	Respironics (IRA)	P	11-17-04	$1,001 - $15,000
SP	Teva Pharm Inds LTD ADRF (IRA)	P	6-25-04	$1,001 - $15,000
SP	Medtronic (IRA)	P	6-25-04	$1,001 - $15,000
SP	Onthofix Intl (IRA)	S	8-6-04	$1,001 - $15,000
DC	Schwab S/T BD Market Fund	PS	6-20-04 8-27-04 11-18-04	$1,001 - $15,000
DC	McGraw-Hill	P	6-25-04	$1,001 - $15,000
DC	Patterson Dental	S	11-17-04	$1,001 - $15,000
DC	ICOS Corp.	S	6-25-04	$1,001 - $15,000
DC	Mylan Laboratories Inc.	S	11-17-04	$1,001 - $15,000
DC	Proctor & Gamble	P	6-25-04	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name Mark Emery Udall

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
DC	Pepsico	P	6-25-04	$1,001 - $15,000
SP	Schwab STT BD Market Fund (SEP IRA)	PS	6-25-04	$1,001 - $15,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Mark Emery Udall

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Chicago Board of Trade, Chicago Board of Options Exchange and the Chicago Mercantile Exchange	July 19	Denver, CO -- Chicago, IL -- Washington, DC	N	Y	N	N/A

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UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A For use by Members, officers, and employees

HAND DELIVER!

LEGISLATIVE RESOURCE CENTER
2005 MAY 13 PM 3:15
(Office Use Only)
U.S. HOUSE OF REPRESENTATIVES

Tom Udall
(Full Name)

308 East Capitol NE Washington, DC 20003
(Mailing Address)

202 225 6190
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives	State: NM District: 3	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☑ No ☐
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☐ No ☑		**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts--	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Tom Udall	05/13/2005

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SCHEDULE I - EARNED INCOME

Name Tom Udall

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Smithsonian Institution	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Tom Udall

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Ameritas Variable Annuity III	$50,001 - $100,000	DIVIDENDS	NONE	
	Boston Capital	$1,001 - $15,000	Tax Credit	$201 - $1,000	
	Capital Income Builder	$15,001 - $50,000	DIVIDENDS/CAPITAL GAINS	$1,001 - $2,500	P
	CNL Income Fund	$50,001 - $100,000	Distribution	$2,501 - $5,000	
	Davis Financial Class A	$50,001 - $100,000	DIVIDENDS/CAPITAL GAINS	NONE	
	Evergreen Core Bond	$100,001 - $250,000	DIVIDENDS/CAPITAL GAINS	$5,001 - $15,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Tom Udall

	Evergreen Strategic Municipal Bond Fund (formerly Evergreen High Income Municipal Bond Fund)	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	
	Growth Fund of America	$15,001 - $50,000	DIVIDENDS	$1 - $200	P
	Investment Company of America	$50,001 - $100,000	DIVIDENDS/CAPITAL GAINS	$1,001 - $2,500	P
	Merrill Lynch Account	$500,001 - $1,000,000	see attached addendum	$15,001 - $50,000	
	New Perspective Fund	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	P
	NM Public Employees Retirement	$50,001 - $100,000	NONE	NONE	
	Northwestern Mutual	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
	Pacific Select Variable Annuity	$50,001 - $100,000	DIVIDENDS	NONE	
	Pacific Value Variable Annuity	$250,001 - $500,000	DIVIDENDS	NONE	
	Washington Mutual Investors	$50,001 - $100,000	DIVIDENDS/CAPITAL GAINS	$201 - $1,000	P
	Wells Limited Partnership	$1,001 - $15,000	Distribution	NONE	

SCHEDULE IV - TRANSACTIONS

Name Tom Udall

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Capital Income Builder	P	6-21-04	$1,001 - $15,000
	Growth Fund of America	P	6-21-04	$15,001 - $50,000
	New Perspective Fund	P	6-21-04	$1,001 - $15,000
	Washington Mutual Investors	P	6-21-04	$1,001 - $15,000
	Investment Company of America	P	6-21-04	$15,001 - $50,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Tom Udall

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Conservation International	Jan 8 - Jan 19	Washington DC - Madagascar - South Africa - Washington DC	Y	Y	Y	N/A
Aspen Institute	Feb 17 - Feb 23	Washington DC - Cancun, Mexico - Washington DC	Y	Y	Y	N/A
Aspen Institute	June 27 - July 2	Washington DC - Lausanne, Switzerland - Washington DC	Y	Y	Y	N/A

SCHEDULE VIII - POSITIONS

Name Tom Udall

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Director	Environmental Law Institute

CMA® ACCOUNT

Cash Flow Summary

Activity Summary	This Statement	Year-to-Date
Opening Balance Cash & Money Accounts	201,534.50	
Net Credits & Debits	682.54	117,739.37
Closing Balance Cash & Money Accounts	202,217.04	

Credits	This Statement	Year-to-Date
Sales		
Income	782.54	6,702.31
Funds Received		
Electronic Tfrs		196,392.06
Other		
Total Credits	782.54	203,094.37

Debits	This Statement	Year-to-Date
Purchases		
Withdrawals		
Electronic Tfrs		85,000.00
Other	100.00	355.00
Total Debits	100.00	85,355.00

Bank Deposit Interest Summary

Money Account Description	Opening Balance	Average Deposit Balance	Current Yield %	Interest on Deposits	Closing Balance
Merrill Lynch Bank USA	98,589	98,502	1.25	104.38	98,604
Merrill Lynch Bank & Trust	102,707	103,239	1.25	109.41	103,612
Total ML Bank Deposit Program	201,296			213.79	202,216

Current Portfolio

Quantity	Security Description	Date Acquired	Adjust/Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Accrued Interest	Estimated Annual Income	Current Yield %
Cash and Money Accounts										
	CASH			1		1				
202,216	ML Bank Deposit Program		1.00	202,216	1.00	202,216			2,527	1.25
Total Cash and Money Accounts				202,217		202,217			2,527	1.25
Municipal Bonds										
25,000	CALIFORNIA ST SEP91 06.250%SEP01 08 MOODY'S: A3 S&P: A	10/17/91	99.47	24,868	112.59	28,149	3,280	521	1,562	5.55
25,000	WALBUQUERQUE NM GROSS RCPTS TAX REV C RFDG OID MAR99 05.000%JUL01 19	02/13/01	100.11	25,029	106.71	26,678	1,648		1,249	4.68

CMA ACCOUNT

Current Portfolio

Quantity	Security Description	Date Acquired	Adjust/Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Accrued Interest	Estimated Annual Income	Current Yield %
Municipal Bonds										
	MOODY'S: A1 S&P: AA ORIGINAL UNIT COST: 100.22									
10,000	WNEW MEXICO FIN AUTH CRT FACS FEE REV SER A MBIA AUG01 05.500%JUN15 20 MOODY'S: AAA S&P: AAA ORIGINAL UNIT COST: 103.76	08/13/01	102.44	10,244	111.40	11,140	895	24	549	4.93
10,000	WFARMINGTON NM POLLUTN CTL REV SOUTHN A RF OID APR91 07.200%APR01 21 MOODY'S: A3 S&P: BBB ORIGINAL UNIT COST: 104.28	09/16/91	102.33	10,233	102.66	10,266	32			
10,000	WFARMINGTON NM POLLUTN CTL REV SOUTHN A RF MBIA JUN93 05.875%JUN01 23 MOODY'S: AAA S&P: AAA ORIGINAL UNIT COST. 101.06	10/03/95	100.04	10,004	101.51	10,151	147	49	587	5.78
Total Municipal Bonds				80,381		86,385	6,002	594	3,949	4.57

Equity Weighting by Economic Sector *

A - Health Care	0%	D - Consumer Discretionary	0%	G - Financials	100%	J - Energy	0%
B - Consumer Staples	0%	E - Industrials	0%	H - Telecommunications Services	0%	K - Unassigned	0%
C - Information Technology	0%	F - Materials	0%	I - Utilities	0%		

* Economic sectors conform to the Global Industry Classification Standard. See statement backer.

CMA® ACCOUNT

Current Portfolio

Quantity		Security Description	Symbol	Sector	Date Acquired	Adjust/Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Annual Income	Current Yield %
Equities												
400	**	PROLOGIS REIT	PLD	(G)	03/23/94	11.50	4,600	43.33	17,332	12,732	584	3.36
44	**	PROLOGIS REIT			06/21/94	15.12	665	43.33	1,906	1,241	64	3.36
112	**	PROLOGIS REIT			07/12/94	15.12	1,694	43.33	4,852	3,158	163	3.36
92	**	PROLOGIS REIT			09/28/95	15.37	1,414	43.33	3,986	2,571	134	3.36
648		Security Sub-Total					8,374		28,077	19,702	946	3.36
100		SOLV-EX CORP NEW	COM SVXC	(K)	N/A	N/A	N/A	.00		N/A		
Total Equities							8,374		28,077	19,702	946	3.37

Research Ratings

Security	Symbol	ML Rating	Independent Research Provider	Independent Research Provider	Jaywalk Consensus Rating (SELL HOLD BUY)	
PROLOGIS	PLD	A-2-7	Sell - Morningstar	Buy - R.E.I.T. Growth & Income Mon		1.76

Merrill Lynch Rating

Volatility Risk Ratings
Indicators of potential price fluctuation are:
A - Low
B - Medium
C - High

Investment Ratings
Indicators of expected total return (price appreciation plus yield) within the 12-month period from the date of the initial rating, are:
1 - Buy (10% or more for Low and Medium Volatility Risk securities - 20% or more for High Volatility Risk securities)
2 - Neutral (0 - 10% for Low and Medium Volatility Risk securities - 0 - 20% for High Volatility Risk securities)
3 - Sell (negative return)
6 - No Rating

Income Ratings
Indicators of potential cash dividends are:
7 - same/higher (dividend considered to be secure)
8 - same/lower (dividend not considered to be secure)
9 - pays no cash dividend

Independent, Third-Party Research

Independent, third-party research on certain companies covered by the firm's research is available to clients at no cost. Clients can access this research at www.mlol.ml.com or can call 1-800-MERRILL to request that a copy of this research be sent to them. For an explanation of independent, third-party research ratings key, ask your Financial Advisor or FAC representative or go to www.ml.com/independentresearch. Please note that the independent, third-party research rating shown above is not necessarily equivalent to, or derived using the same methodology as, ML Research ratings or the ratings of other independent, third-party research providers.

THOMAS S UDALL TTEE

5411

W (D)

Research Ratings

Jaywalk Consensus Rating
Jaywalk Consensus Rating represents the average of the ratings of available independent, third-party research providers. For additional information about Jaywalk Consensus Rating, ask your Financial Advisor or FAC representative or go to www.ml.com/independentresearch.

Total of Long Portfolio	290,972*	316,680	25,704 *	7,423	2.34
Total of Estimated Accrued Interest		594			

* - Excludes N/A Items

W Bonds purchased at a premium show amortization

r Bonds purchased at a discount show accretion

Statement Activity

Date	Transaction	Quantity	Description	Price	Debit	Credit
Dividends and Interest						
12/01	Bond Interest		FARMINGTON NM POLLTN CTL RV REF SOUTHN CA ED MBIA JUN93 05.875%JUN01 23 PAY DATE 12/01/2004			293.75
12/15	Bond Interest		NEW MEXICO FIN AUTH CRT FACS FEE REV SER A MBIA AUG01 05.500%JUN15 20 PAY DATE 12/15/2004			275.00
12/31	Bank Interest		BANK DEPOSIT INTEREST			.79
	Income Total		ML Bank Deposit Program			213.00
Net Total						782.54
Other Activity						
12/03	Journal Entry		ANNUAL ACCOUNT FEE CUST PAYMT FOR 456-54518		100.00	
Net Total					100.00	

Statement Activity

Date	Description	Deposits	Withdrawals	Date	Description	Deposits	Withdrawals
Money Account Transactions							
12/06	ML Bank Deposit Program	432.00		Total		707.00	
12/20	ML Bank Deposit Program	275.00		Net Total		707.00	

5412

III (E)

Insurance Contracts

Life Insurance / Annuities	Contract Value	Estimated Annual Payments
TRANMERICA LANDMARK 95 POLICY NUMBER 100242EDV CONTRACT VALUE AS OF 12/30/04	177,872	
Life Insurance / Annuities Subtotal	177,872	

Insurance contracts are not held in your account.

Customer Service For information about your account, please call 1-800-MERRILL (1-800-637-7455). To report Lost or Stolen Visa Cards or Checks, please call 1-800-262-5678.

5413

SEP ACCOUNT

III (F)

Cash Flow Summary

Activity Summary	This Statement	Year-to-Date
Opening Balance Cash & Money Accounts	30,588.28	
Net Credits & Debits	32.41	386.73
Closing Balance Cash & Money Accounts	30,620.69	

Credits	This Statement	Year-to-Date
Sales		
Income	234.90	589.22
Funds Received		
Electronic Tfrs		
Other	100.00	100.00
Total Credits	334.90	689.22

Debits	This Statement	Year-to-Date
Purchases		
Withdrawals		
Electronic Tfrs		
Other	302.49	302.49
Total Debits	302.49	302.49

Current Portfolio

Quantity	Security Description	Date Acquired	Adjust/Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Accrued Interest	Estimated Annual Income	Current Yield %
Cash and Money Accounts										
30,620	ML BANK USA RASP		1.00	30,620	1.00	30,620			382	1.25

Equity Weighting by Economic Sector *

A - Health Care	0%	D - Consumer Discretionary	0%	G - Financials	100%	J - Energy	0%
B - Consumer Staples	0%	E - Industrials	0%	H - Telecommunications Services	0%	K - Unassigned	0%
C - Information Technology	0%	F - Materials	0%	I - Utilities	0%		

* Economic sectors conform to the Global Industry Classification Standard. See statement backer.

Current Portfolio

Quantity	Security Description	Symbol	Sector	Date Acquired	Adjust/Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Annual Income	Current Yield %
Equities											
138	** PROLOGIS REIT	PLD	(G)	09/18/97	22.58	3,116	43.33	5,979	2,862	201	3.36
Total Equities						3,116		5,979	2,862	201	3.37

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III(G)

Research Ratings

Security	Symbol	ML Rating	Independent Research Provider	Independent Research Provider	Jaywalk Consensus Rating SELL HOLD BUY
PROLOGIS	PLD	A-2-7	Sell - Morningstar	Buy - R.E.I.T. Growth & Income Mon	1.76

Merrill Lynch Rating

Volatility Risk Ratings
Indicators of potential price fluctuation are:
A - Low
B - Medium
C - High

Investment Ratings
Indicators of expected total return (price appreciation plus yield) within the 12-month period from the date of the initial rating, are:
1 - Buy (10% or more for Low and Medium Volatility Risk securities - 20% or more for High Volatility Risk securities)
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3 - Sell (negative return)
6 - No Rating

Income Ratings
Indicators of potential cash dividends are:
7 - same/higher (dividend considered to be secure)
8 - same/lower (dividend not considered to be secure)
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Jaywalk Consensus Rating

Jaywalk Consensus Rating represents the average of the ratings of available independent, third-party research providers. For additional information about Jaywalk Consensus Rating, ask your Financial Advisor or FAC representative or go to www.ml.com/independentresearch.

Current Portfolio

Quantity	Security Description	Total Client Investment	Cumulative Investment Return	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Annual Income	Current Yield %
Mutual Funds and Defined Asset Funds									
Equity Funds									
501	ALLIANCEBERNSTEIN LG CAP GROWTH FD INC CL A	$15,062	($5,924)	16,767	18.24	9,138	N/A		
	(.2450 FRACTIONAL SHARE) INITIAL PURCHASE: 05/28/99			N/A	18.24	4	N/A		
879	DAVIS NY VENTURE FD A	$18,287	$8,689	22,127	30.69	26,976	N/A	203	.75
	(.5090 FRACTIONAL SHARE)			N/A	30.69	15	N/A		.75

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SEP ACCOUNT

III (H)

Current Portfolio

Quantity	Security Description	Total Client Investment	Cumulative Investment Return	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Annual Income	Current Yield %
Mutual Funds and Defined Asset Funds									
	INITIAL PURCHASE: 07/25/96								
Total Equity Funds			$2,765	38,895		36,134		204	.56
Total Funds			$2,765	38,895		36,134		204	.56

TOTAL CLIENT INVESTMENT: Cost of shares directly purchased and still held. Does not include shares purchased through reinvestment.
CUMULATIVE INVESTMENT RETURN: Estimated Market Value minus Total Client Investment. Cumulative Investment Return is the capital appreciation (depreciation) of all shares purchased, including shares purchased through reinvestment.

UNREALIZED GAIN or (LOSS): Estimated Market Value minus Total Cost Basis.
Provided for Tax Planning purposes only and is not applicable to retirement accounts "denoted by N/A".
INITIAL PURCHASE: Date of your initial investment in this fund.

Total of Long Portfolio				72,632*		72,734	2,862 *	788	1.08

* - Excludes N/A Items

Statement Activity

Date	Transaction	Quantity	Description	Price	Debit	Credit
Security Transactions						
12/02	Divd Reinv	6	DAVIS NY VENTURE FD A REINV AMOUNT $202.49 REINV PRICE $30.25000 QUANTITY BOT 6.6940 AS OF 12/01			
12/02	Journal Entry	1	DAVIS NY VENTURE FD A FULL SHARE ACCUM			
Net Total						
Dividends and Interest						
12/02 *	Dividend		DAVIS NY VENTURE FD A PAY DATE 12/01/2004			202.49
	Income Total		ML BANK USA RASP			32.41
Net Total						234.90
Funds Received, Withdrawals, and Charges						
12/01	Fund Delivery	-51	ML BANK USA RASP			
12/01	Subscription	51	ML BANK USA RASP		51.00	

FBO JILL Z COOPER

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SEP ACCOUNT

III (I)

Statement Activity

Date	Transaction	Quantity	Description	Price	Debit	Credit
Net Total					51.00	
Other Activity						
12/02	Reinvestment		DAVIS NY VENTURE FD A		202.49	
12/03	Journal Entry		CUST PAYMT FROM 45614832			100.00
12/03	Journal Entry		ANNUAL ACCOUNT FEE 010104-123104 $100.00		100.00	
Net Total					202.49	

SEP Retirement Money Accounts Summary

Description	Money Account Balances Opening	Closing	Dividends This Statement	Year to Date
ML Bank USA RASP	$30,537.05	$30,620.46	$32.41	$185.25

SEP Retirement Account Plan Summary

Account Type: SEP PLAN

Year-End Plan Value as of December 31, 2004	$72,735.06
Contributions after 12/30/03 for 2003	$.00
Employer Contributions after 12/30/03 for 2003	$.00

For purposes of calculating required minimum distributions or completing IRS Form 8606, you are required to use the value of your account as of 12/31/04. This value should include your Priced Portfolio total and the value of certain limited partnerships and other direct investments as well as any securities that we are unable to price - marked "Unavailable". The "Year-End Plan Value" shown consists of your Priced Portfolio total plus the estimated value of limited partnerships or other direct investments reported on your year-end statement.

For IRA, IRRA, SEP/IRA, SIMPLE/IRA, Roth IRA and ESA accounts, the Year-End Plan Value represents the valuation we must furnish to you and the Internal Revenue Service as part of the IRS Form 5498 reporting requirements.

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RETIREMENT ACCOUNT

IV (J)

Cash Flow Summary

Activity Summary	This Statement	Year-to-Date
Opening Balance Cash & Money Accounts	13,752.69	
Net Credits & Debits	27.34	534.49
Closing Balance Cash & Money Accounts	13,780.03	

Credits	This Statement	Year-to-Date
Sales		
Income	27.34	534.49
Funds Received		
Electronic Tfrs		
Other		100.00
Total Credits	27.34	634.49

Debits	This Statement	Year-to-Date
Purchases		
Withdrawals		
Electronic Tfrs		
Other		100.00
Total Debits		100.00

Current Portfolio

Quantity	Security Description	Date Acquired	Adjust/Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Accrued Interest	Estimated Annual Income	Current Yield %
Cash and Money Accounts										
13,779	ML BANK USA RASP		1.00	13,779	1.00	13,779			172	1.25

Equity Weighting by Economic Sector *

A - Health Care	31%	D - Consumer Discretionary	35%	G - Financials	0%	J - Energy	0%
B - Consumer Staples	0%	E - Industrials	0%	H - Telecommunications Services	0%	K - Unassigned	0%
C - Information Technology	34%	F - Materials	0%	I - Utilities	0%		

* Economic sectors conform to the Global Industry Classification Standard. See statement backer.

Current Portfolio

Quantity	Security Description	Symbol	Sector	Date Acquired	Adjust/Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Annual Income	Current Yield %
Equities											
200	** DELL INC	DELL	(C)	03/31/99	41.53	8,307	42.14	8,428	120		
150	** HOME DEPOT INC	HD	(D)	03/31/99	42.66	6,400	42.74	6,411	10	51	.79
1	** MEDCO HEALTH SOLUTIONS I	MHS	(A)	N/A	N/A	N/A	41.60	41	N/A		

RETIREMENT ACCOUNT

III (K)

Current Portfolio

Quantity	Security Description	Symbol	Sector	Date Acquired	Adjust/Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Annual Income	Current Yield %
Equities											
29	** MEDCO HEALTH SOLUTIONS I			N/A	N/A	N/A	41.60	1,206	N/A		
30	Security Sub-Total							1,248			
13	** MERCK&CO INC	MRK	(A)	06/03/88	.00	0	32.14	417	417	19	4.72
240	** MERCK&CO INC			06/02/92	.00	0	32.14	7,713	7,713	364	4.72
253	Security Sub-Total							8,131	8,130	384	4.72
317	** SUN MICROSYSTEMS INC COM	SUNW	(C)	01/16/01	31.45	9,969	5.39	1,708	(8,261)		
108	** VIACOM INC CL B	VIAB	(D)	03/31/99	38.56	4,164	36.39	3,930	(234)	30	.76
Total Equities						28,842		29,857	(235)	465	1.56

Research Ratings

Security	Symbol	ML Rating	Independent Research Provider	Independent Research Provider	Jaywalk Consensus Rating (SELL HOLD BUY)	
DELL INC	DELL	C-2-9	Hold - Morningstar	Buy - Thomas White International		1.56
HOME DEPOT INC	HD	B-1-7	Hold - Morningstar	Buy - Argus Fundamental Research		1.40
MEDCO HEALTH SOLUTIONS I	MHS	C-2-9	Hold - Morningstar	Hold - Ford Equity Research		1.68
MERCK&CO INC	MRK	B-2-7	Hold - Morningstar	Hold - Cathay Financial, L.L.C.		2.03
SUN MICROSYSTEMS INC COM	SUNW	C-2-9	Sell - Morningstar	Hold - Channel Trend Inc.		2.07
VIACOM INC CL B	VIAB	B-1-7	Hold - Morningstar	Buy - Boyar's Alternative Viewpoin		2.11

Merrill Lynch Rating

Volatility Risk Ratings
Indicators of potential price fluctuation are:
A - Low
B - Medium
C - High

Investment Ratings
Indicators of expected total return (price appreciation plus yield) within the 12-month period from the date of the initial rating, are:
1 - Buy (10% or more for Low and Medium Volatility Risk securities - 20% or more for High Volatility Risk securities)
2 - Neutral (0 - 10% for Low and Medium Volatility Risk securities - 0 - 20% for High Volatility Risk securities)
3 - Sell (negative return)
6 - No Rating

Income Ratings
Indicators of potential cash dividends are:
7 - same/higher (dividend considered to be secure)
8 - same/lower (dividend not considered to be secure)
9 - pays no cash dividend

III (L)

Research Ratings

Independent, Third-Party Research

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Jaywalk Consensus Rating

Jaywalk Consensus Rating represents the average of the ratings of available independent, third-party research providers. For additional information about Jaywalk Consensus Rating, ask your Financial Advisor or FAC representative or go to www.ml.com/independentresearch.

Total of Long Portfolio	42,622*	43,636	(235)*	638	1.46

* - Excludes N/A Items

Statement Activity

Date	Transaction	Quantity	Description	Price	Debit	Credit
Dividends and Interest						
12/16 *	Dividend		HOME DEPOT INC HOLDING 150.0000 QUAL DIV $12.75 PAY DATE 12/16/2004			12.75
	Income Total		ML BANK USA RASP			14.59
Net Total						27.34
Funds Received, Withdrawals, and Charges						
12/17	Fund Delivery	-13	ML BANK USA RASP			
12/17	Subscription	13	ML BANK USA RASP		13.00	
Net Total					13.00	

Retirement Money Accounts Summary

Description	Money Account Balances Opening	Closing	Dividends This Statement	Year to Date
ML Bank USA RASP	$13,752.04	$13,779.63	$14.59	$82.85

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

10 2005 MAY 16 AM 10:27

MC (Office Use Only)

Frederick Stephen Upton
(Full Name)

2183 Rayburn HOB
(Mailing Address)

Washington, D.C. 20515

Daytime Telephone: 202-225-3761

Filer Status	[X] Member of the U.S. House of Representatives	State: Michigan District: 6	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Fred Upton	5-16-05

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SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Westminster Pre-school	spouse salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name UPTON

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: Transaction P, S, E
SP	Mega Corp. Stock					X								X										X								P
DC, JT	Examples: Simon & Schuster			Indefinite																Royalties									X			
JT	1st Bank of Paducah, KY accounts						X									X									X							
SP	Putnam Investments			X										X		X							X									
JT	Whirlpool									X				X														X				
	Petroleum Revenue Service		X																	oil & Gas			X									
	US-UPS Family Partnership			X										$1		X						X										
JT	W. Putman Credit Union					X										X						X										
	5th 3rd Savings Bank			X												X						X										

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name UPTON

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
JT	Hilliard Lyons Acct's —									X				X		X											X					
	composed of:																															
JT	• H. Lyons Gov. Fund				X																											
SP	• AT&T			X																												
SP	• Atria			X																												
SP	• BP				X																											
SP	• Bristol Myers			X																												
SP	• Comcast			X																												
SP	• Direct-TV			X																												
SP	• Dow			X																												
SP	• Exxon					X																										
SP	• Fortune Brands			X																												
SP	• Gallaher Group			X																												
JT	• GE					X																										
SP	• IBM				X																											
SP	• Monsanto			X																												
SP	• Nationwide Finl.			X																												
SP	• News Corp			X																												
JT	• Pfizer						X																									
SP	• Raytheon			X																												
SP	• SBC			X																												
JT	• Scherring AG				X																											

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name UPTON

Page 5 of 10

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Hilliard Lyons (Cont)																															
JT	• Stryker						X																									P
SP	• Verizon			X																												
JT	• Weighy								X																							
SP	• Lenox Capital Series B			X																												
SP	• Sonbane				X																											
SP	• Vanguard Bond Fund				X																											
	• J.P. Morgan			X																												
	• Chemical Fin'l							X																								
	• Chesapeake Energy					X																										
	• Disney				X																											
	• Pepsi							X																								
	• Resen. Tech.				X																											
	• Yum					X																										
	• Mass. Inv. Growth				X																											
	• Seligman Fund				X																											

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5425

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Upton

Page 6 of 10

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction (P, S, E)
	Trusts established w/No control by me — Not able to give directions to Financial Institutions that manage Upton, Vial, and Dynasty				
	Accts value:	X	X X	X	
JT	• Bell South	X			
	• ~~AEGR~~ Aegon	X			
	• BP	X			
	• Vodafone	X			
	• American Express	X			
	• Exxon - Mobil	X			
	• ~~HEP~~ Hewlett - Packard	X			
	• IBM	X			
	• Kimberly - Clark	X			
	• J.C. Penny	X			
	• Pfizer	X			
JT	• Pepsi	X			
JT	• SBC	X			
	• Verizon	X			
JT	• Wrisley	X			
	• Green Falls Dehi Bond	X			
	• Northern FDS Fixed Fnd	X			
	Northern FDS U.S. Govt Fnd	X			
	• Pat College & Univ. mkt	X			
JT	• Cash	X			
	• 5th 3rd Prime Mmkt	X			

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Upton

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	—Trusts— Viol Upton Dynasty																															
DC	• 5th 3rd Money Mkt					X																										
DC	• Masters Select Mkt						X																									
DC	• Disney					X																										
DC	• Fid Nat'l. Mtg				X																											
DC	• GE					X																										
DC	• Stryker						X																									
	Charmed Fin'l			X																												
	• 5th 3rd Bancorp					X																										
	• Bank One					X																										
	• Fidelity NT Mun.				X																											
	• Smallcap World Fund			X																												
	• T. Rowe Price New Horizons			X																												
	• One Group Muni Bond			X																												

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Name UPTON

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-04		X								
SP	Standard Coml Corp debenture		X		5-04-04	X									
JT	Stryker	X			8-03-04	X									

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples.	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Natl Assoc of Broadcasters	April 18-20	Philadelphia → Las Vegas → DC	Y-2 nts	Y	N	N
	Mich. Assn of Broadcasters	Aug 8-10	No travel exp — Mackinac Island	Y-2 nts	Y	Y	Y
	Alliance of Auto Manufact	Jan 5-6	DC → Detroit	Y-1 nt	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterpnse, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Ex-officio Bd Member	Alliance For World Class Communities
Board Member	Nature Conservancy - Michigan Chapter
Steering Cmte Member	Congressional Conversation on Race - Faith & Politics Organization
Steering Cmte Member	GOP Mainstreet Partnership
Co-Partner	US-UPS (Family Organization)
General Partner	Petroleum Revenue Service (N. Antrim well)

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	None	

GPO: 2005 98-729 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

5 HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2005 MAY 16 PM 3:36
MC
(Office Use Only)

Chris Van Hollen
(Full Name)
9805 Old Spring Rd., Kensington MD 20895
(Mailing Address)
Daytime Telephone: 202-225-5341

Filer Status	☒ Member of the U.S. House of Representatives — State: MD District: 08	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☒
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐	No ☒
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☒	No ☐
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependant child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Chris Van Hollen	5/15/05

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Name Chris Van Hollen | Page 1 of 4

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	World Affairs Council of Washington DC	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

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Name Chris Van Hollen | Page 2 of 4

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E P, S, E
SP, DC, JT	Examples: SP Mega Corp. Stock					X								X										X								P
	Examples: Simon & Schuster			Indefinite																Royalties									X			
	Examples: 1st Bank of Paducah, KY accounts						X									X										X						
	Cong'l Fed. Credit Union							✓									✓						✓									
	Johnson + Johnson stock			✓										✓								✓										
	Pepsico Inc stock				✓									✓									✓									
	Pfizer Inc. Del stock			✓										✓								✓										
	Dow Chemical stock			✓										✓								✓										

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Chris Van Hollen

Page 3 of 4

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
	Exxon Mobil stock	C	DIVIDENDS	II	
	General Electric stock	C	DIVIDENDS	II	
	EIF Equity Income Fund 1st Exchange Series - AT&T	C	DIVIDENDS	II	
	EIF Equity Incom Fund 2nd Exchange Series AT&T	A	DIVIDENDS	II	
	Merrill Lynch Ready Assets Trust	B	DIVIDENDS	II	
	Yum Brands Inc	B	DIVIDENDS	II	
	Arent Fox Pension Plan (Cigna Retirement Services) — Alliance Bernstein Mutual Fund	F	NA		
	State of Maryland / General Assembly Pension Plan	D	NA		

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Director	Boys & Girls Clubs of Greater Washington

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

Use additional sheets if more space is required.

HAND DELIVERED

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

2005 MAY 16 PM 5:51

MC

(Office Use Only)

NYDIA M. VELAZQUEZ
(Full Name)

2241 RAYBURN WASHINGTON, DC 20515
(Mailing Address)

202-225-2361
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives	State: NY District: 12	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Nydia M. Velázquez	05-16-05

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SCHEDULE I - EARNED INCOME

Name NYDIA M. VELAZQUEZ

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
New York City Comptroller	Spouse Salary	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name NYDIA M. VELAZQUEZ

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.		BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	84 Woodhull Street Brooklyn, NY 11231	$1,000,001 - $5,000,000	RENT	$15,001 - $50,000	
SP	20th Century Roth IRA	$15,001 - $50,000			
SP	HSBC IRA	$1,001 - $15,000			

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SCHEDULE V - LIABILITIES

Name NYDIA M. VELAZQUEZ

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
JT	Chase Manhattan	Mortgage on 84 Woodhull, Brooklyn, NY	$500,001 - $1,000,000
JT	Chase Manhattan	Equity Line of Credit	$250,001 - $500,000
	Wright Patman Credit Union	Revolving Charge Account	$15,001 - $50,000
JT	MBNA	Revolving Charge Account	$15,001 - $50,000
SP	MBNA AAA	Revolving Charge Account - Home Improvements	$15,001 - $50,000
SP	MBNA	Revolving Charge Account	$10,001 - $15,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name NYDIA M. VELAZQUEZ

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
National Association of Government Guaranteed Lenders	Oct. 10-14	NY, NY--San Diego--NY, NY	Y	N	Y	
National Association of Development Companies	Nov. 6-8	NY,NY--San Juan--NY, NY	Y	N	N	

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A

For use by Members, officers, and employees

~~HAND DELIVERED~~

Peter J. Visclosky
(Full Name)

P.O. Box 10847 Merrillville, IN 46411
(Mailing Address)

202-225-2461
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives — State: IN, District: 01	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☐ No ☑	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☐ No ☑	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5/9/05

5441

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Peter J. Visclosky

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Citigroup Incorporated	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Consolidated Tomoka Land Company	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	Kulicke and Soffa Industries	$1,001 - $15,000			
	J.P. Morgan Chase and Company	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	E
	Northwest Indiana Bancorp	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Merrill Lynch and Company	$1,001 - $15,000	DIVIDENDS	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Peter J. Visclosky

	Merrill Lynch Bank USA	$15,001 - $50,000	INTEREST	$1 - $200	E
DC	Congressional Federal Credit Union	$1,001 - $15,000	INTEREST	$1 - $200	
DC	Congressional Federal Credit Union	$1,001 - $15,000	INTEREST	$1 - $200	
DC	Dodge and Cox Stock Fund	$50,001 - $100,000	CAPITAL GAINS	$1,001 - $2,500	P
DC	Mutual Qualified Fund	$15,001 - $50,000	CAPITAL GAINS	$201 - $1,000	
DC	Dodge and Cox Stock Fund	$15,001 - $50,000	CAPITAL GAINS	$1,001 - $2,500	P
DC	Mutual Qualified Fund	$15,001 - $50,000	CAPITAL GAINS	$201 - $1,000	
DC	Merrill Lynch Trust Account, Tiger Principal Series 23	$1,001 - $15,000	INTEREST	$201 - $1,000	
DC	Merrill Lynch Trust Account, Treasury Strips 5/15/05	$1,001 - $15,000	INTEREST	$1 - $200	
DC	Merrill Lynch Trust Account, Treasury Strips 5/15/06	$1,001 - $15,000	INTEREST	$201 - $1,000	
DC	Merrill Lynch Trust Account, IN Tran FIN at HWY ETM	$1,001 - $15,000	INTEREST	$201 - $1,000	
DC	Merrill Lynch Trust Account, IN Tran FIN at HWY OUTSTD	$1,001 - $15,000	INTEREST	$201 - $1,000	
DC	Peoples Bank, Savings Account	$1,001 - $15,000	INTEREST	$1 - $200	
DC	Peoples Bank, Savings Account	$1,001 - $15,000	INTEREST	$1 - $200	

SCHEDULE IV - TRANSACTIONS

Name Peter J. Visclosky

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	First Mariner Bancorp	S	12/03/04	$15,001 - $50,000
	J.P. Morgan Chase and Company (received in exchange for)	E	07/01/04	$15,001 - $50,000
	Bank One Corporation	E	07/01/04	$15,001 - $50,000
	Merrill Lynch Bank USA (received in exchange for)	E	08/05/04	$15,001 - $50,000
	Deutsche Bank - Alex Brown	E	08/05/04	$15,001 - $50,000
DC	Dodge and Cox Stock Fund	P	1/15, 2/17, 3/15, 4/15, 5/17, 6/15, 7/15, 8/16, 9/15, 10/15, 11/15, 12/15	$1,001 - $15,000
DC	Dodge and Cox Stock Fund	P	1/15, 2/17, 3/15, 4/15, 5/17, 6/15, 7/15, 8/16, 9/15, 10/15, 11/15, 12/15	$1,001 - $15,000

SCHEDULE V - LIABILITIES

Name Peter J. Visclosky

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	First U.S. Bank, N.A. - Delaware	Revolving Charge Account	$15,001 - $50,000

SCHEDULE VIII - POSITIONS

Name Peter J. Visclosky

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Trustee	The Visclosky Foundation, P.O. Box 10847 Merrillville, IN 46411

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UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

2005 MAY 16 PM 4:57

MC

(Office Use Only)

5447

Gregory Paul Walden
(Full Name)

1504 Sherman Ave. Hood River, OR 97031
(Mailing Address)

202-225-6730
Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives — State: OR, District: 02	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and wilfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Gregory Paul Walden	May 16, 2005

SCHEDULE I - EARNED INCOME

Name Gregory Paul Walden

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Columbia Gorge Broadcasters	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Gregory Paul Walden

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	Columbia Gorge Broadcasters	$1,000,001 - $5,000,000	DIVIDENDS	$15,001 - $50,000	
	State of Oregon PERS	$15,001 - $50,000	NONE	NONE	
JT	Columbia Bancorp Stock	$250,001 - $500,000	DIVIDENDS	$5,001 - $15,000	
JT	Tower Property (land), 1190 22nd St., Hood River, OR 97031	$100,001 - $250,000	RENT	$15,001 - $50,000	
	Columbia Bancorp Stock-IRA- (administered by Prime Vest)	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P
JT	Investment Company of America	$1,001 - $15,000	DIVIDENDS	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Gregory Paul Walden

	Investment Company of America-IRA	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Growth Fund of America-IRA	$15,001 - $50,000	DIVIDENDS	$1 - $200	
SP	Columbia Bancorp Stock-IRA (administered by Prime Vest)	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P
	Columbia River Bank DDA	$1,001 - $15,000	INTEREST	$1 - $200	
SP	Investment Company of America-IRA	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
SP	Growth Fund of America-IRA	$15,001 - $50,000	DIVIDENDS	$1 - $200	
JT	MSW Communications, LLC Hood River, OR	$15,001 - $50,000	Royalty Payment (Royalty Agreement)	$15,001 - $50,000	
	Oregon State General Baccalaureate Bond	$15,001 - $50,000	INTEREST	$201 - $1,000	
JT	Home lot: 2909 Hidden Valley Dr., Lake Havasu City, AZ	$15,001 - $50,000	NONE	NONE	
	Prime Vest Money Market (administered by CRB Financial Services)	$50,001 - $100,000	INTEREST	$2,501 - $5,000	
JT	Property (house), 128 N. Carolina, SE, Washington, DC 20003	$250,001 - $500,000	RENT	$2,501 - $5,000	P

SCHEDULE IV - TRANSACTIONS

Name Gregory Paul Walden

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
JT	Property (house), 128 N. Carolina, SE, Washington, DC 20003	P	06-03-04	$250,001 - $500,000
SP	Columbia Bancorp Stock (IRA)	P	02-10-04	$1,001 - $15,000
	Columbia Bancorp Stock (IRA)	P	2-10-04	$1,001 - $15,000

SCHEDULE V - LIABILITIES

Name Gregory Paul Walden

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
JT	Countrywide	Mortgage on 128 N. Carolina Ave., SE, Washington, DC 20003	$250,001 - $500,000
JT	Homecomings Financial	Mortgage on 128 N. Carolina Ave., SE, Washington, DC 20003	$15,001 - $50,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Gregory Paul Walden

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure–Destination–Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
National Assn of Broadcasters	April 16-20	Portland–Las Vegas–Portland	Y	Y	Y	2 days

SCHEDULE VIII - POSITIONS

Name Gregory Paul Walden

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
President	Columbia Gorge Broadcasters
Member	MSW Communications, LLC

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

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U.S. HOUSE OF REPRESENTATIVES
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MC (Office Use Only)

HAND DELIVERED

JAMES T. WALSH
(Full Name)

400 BROADVIEW DR.
(Mailing Address)

SYRACUSE, NEW YORK 13215

Daytime Telephone: (202) 225-3701

Filer Status	[X] Member of the U.S. House of Representatives	State: NEW YORK District: 25TH	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X] No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ] No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ] No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X] No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X] No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X] No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X] No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X] No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	James T. Walsh	May 10, 2005

5455

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	ONONDAGA COMMUNITY COLLEGE	SPOUSE SALARY	N/A
	NEW YORK STATE LOCAL RETIREMENT SYSTEM	PENSION (PRIOR EMPLOY)	$2,938

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B												Block C							Block D											Block E
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	Examples:	SP	Mega Corp. Stock				X								X										X								P
			Simon & Schuster	Indefinite																	Royalties									X			
			1st Bank of Paducah, KY accounts					X									X									X							
	WACHOVIA SECURITIES IRA																																
	ROLLOVER ACCOUNT:																																
	MEDCO HEALTH SOLUTIONS, INC			X											X							X											
	MERCK & CO. INC.			X											X								X										
	MICROSOFT CORP.				X										X									X									
	GENERAL ELECTRIC CO.				X										X								X										

For additional assets and unearned income, use next page.

5457

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JAMES T. WALSH

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	DOW JONES SELECT DIVIDEND INDEX FUND			X										X									X									P(1)
	JENNISON VALUE FD CL.A				X									X									X									P(2)
	VAN KAMPEN GOVERNMENT SEC FD. CL.A.			X										X								X										P(2)
	SUN MICROSYSTEMS INC.	X															X						X									S
	CISCO SYSTEMS, INC.	X															X							X								S
	ORACLE CORP	X															X							X								S
	MONEYMART ASSETS CLASS A	X												X								X										S
	EVERGREEN M.M. FUND CL SI		X											X								X										P(3)

P(1) - ACQUIRED BY PURCHASE IN 2004

P(2) - SHARES ACQUIRED BY REINVESTED DIVIDENDS, UNDER $1 000

P(3) - ACQUIRED BY PURCHASE IN 2004, UNDER $1,000

This page may be copied if more space is required.

5458

SCHEDULE IV — TRANSACTIONS

Name JAMES T. WALSH

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–04		X								
	DOW JONES SELECT DIVIDEND INDEX FUND	X			9/9/04	X									
	SUN MICROSYSTEMS, INC.		X		9/7/04	X									
	CISCO SYSTEMS, INC.		X		9/7/04	X									
	ORACLE CORP.		X		9/7/04	X									
	MONEYMART ASSETS CLASS A		X		9/3/04	X									

This page may be copied if more space is required.

Name JAMES T. WALSH

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	ACS GS ROCKVILLE, MD	PERSONAL (STUDENT LOAN)			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
DIRECTOR	ERIE CANAL MUSEUM
DIRECTOR	KIDNEY FOUNDATION - CNY CHAPTER
TRUSTEE	VERA HOUSE
DIRECTOR	EVERSON MUSEUM

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
N/A	NEW YORK STATE LOCAL RETIREMENT SYSTEM	PENSION PLAN INTEREST
N/A	VERIZON COMMUNICATIONS	PENSION PLAN INTEREST AVAILABLE AT RETIREMENT AGE

GPO: 2005 98-729 (mec)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

MAY 11 2005
LEGISLATIVE RESOURCE CENTER

2005 MAY 16 AM 10: 52
U.S. HOUSE OF REPRESENTATIVES
MC
(Office Use Only)

ZACHARY P. WAMP
(Full Name)

719 HAWKS NEST
(Mailing Address)

Daytime Telephone:

CHATTANOOGA, TN 37419

Filer Status	[X] Member of the U.S. House of Representatives — State: TN District: 03	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Zach Wamp	5/9/05

5462

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	FRIENDS OF ZACH WAMP	SPOUSE SALARY	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name ZACHARY P. WAMP | Page 3 of 4

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset												Block C: Type of Income							Block D: Amount of Income											Block E: Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	SP Mega Corp. Stock					X								X										X								P
DC,	*Examples:* Simon & Schuster			Indefinite																Royalties									X			
JT	1st Bank of Paducah, KY accounts						X									X										X						
JT	TN VALLEY CREDIT UNION			X												X						X										

For additional assets and unearned income, use next page.

5464

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	The Keystone Center	Feb 18-21 2004	Chatt,TN - Denver,CO - - Chatt,TN	N	Y	Y	N
	U.S. House of Reps.	July 25 - Aug 4, 2004	Atl,GA - Dar Es Salaam - Capetown - Atl,GA	Y	Y	Y	N

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MAY 1 3 2015

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U.S. HOUSE OF REPRESENTATIVES
(Office Use Only)

MC

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

MAXINE WATERS
(Full Name)

555 SOUTH FLOWER STREET, SUITE 4210
(Mailing Address)

LOS ANGELES, CA 90071

Daytime Telephone: (213) 489-4792

Filer Status	[X] Member of the U.S House of Representatives — State: CA District: 35	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Maxine Waters	5-16-05

5466

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
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	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	STATE OF CALIFORNIA	Legislative Pension	$4,815.36
	CVE Commercial, LLC	Spouse Consulting Fee	NA
	Siebert, Brandford, Shank & Co.	Spouse Consulting Fee	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

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If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT). In the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year.

If you use a valuation method other than fair market value, please specify the method used.

If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENTS	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E
SP, DC, JT	*Examples:* SP Mega Corp. Stock					X								X										X								P
	Simon & Schuster		Indefinite																	Royalties								X				
	1st Bank of Paducah, KY accounts						X									X									X							
SP	ONEUNITED BANK							X						X											X							P, S
	CONGRESSIONAL FED.CRED.UNION			X												X						X										
SP	AMERICAN GOLF JT.VENTURE					X								X												X						
SP	TRACT UNIT 3557,LOT 96,CA				X																X											
SP	2201 KIRK ST.,HOUSTON,TX			X																	X											
SP	ONEUNITED BANK							X								X								X								

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name MAXINE WATERS

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
JT	549 So.Lucerne Blvd.,LA	J X		I X	P
SP	701 W.BARSTOW;PALM SPRINGS CA	C X		I X	
	MERRILL LYNCH MONEY MKT.(IRA)	C X	DIVIDENDS X	II X	
	EVERGREEN SMALL C.FUND (IRA)	C X	RENT X	II X	
	MERILL LYNCH CAP FUND (IRA	D X	DIVIDENDS X, RENT X	III X	
	GLOBAL ALLOCATION FUND (IRA)	C X	DIVIDENDS X, RENT X	II X	
SP	MER.LYNCH MONEY MKT. (IRA)	C X	DIVIDENDS X, RENT X	II X	
SP	US TREASURY TIGR SER.1 (IRA)	C X	RENT X	I X	
SP	MERILL LYNCH CAP FUND (IRA	F X	DIVIDENDS X, RENT X	VI X	
SP	GLOBAL ALLOCATION FUND (IRA)	F X	DIVIDENDS X, RENT X	IV X	
SP	SMALL CAP WORLD FUND (IRA)	C X	DIVIDENDS X, RENT X	II X	
SP	SCUDER CA TAX FREE FUND	D X	DIVIDENDS X, INTEREST X	IV X	
SP	MER.LYNCH MONEY MARKET	A X	RENT X		
SP	MER.LYNCH CAP. FUND	C X	DIVIDENDS X, CAPITAL GAINS X		
SP	GLOBAL ALLOCATION FUND	D X	DIVIDENDS X, CAPITAL GAINS X	III X	
SP	CMA FUND	D X	DIVIDENDS X		
	MER.LYNCH MONEY MKT.	C X	RENT X	II X	
SP	ECI HOLDINGS,INC.	F X	DIVIDENDS X	I X	
	MASSACHUSETTS MUTUAL	D X	Other Type of Income (Specify): Annuity		P
	ONEUNITED BANK	F X	DIVIDENDS X	V X	P,S

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SCHEDULE IV — TRANSACTIONS

Name MAXINE WATERS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H $1,000,001-$5,000,000	I $5,000,001-$25,000,000	J $25,000,001-$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-04		X								
JT	549 So.Lucerne Blvd., Los Angeles,CA 90020	X			10-06-04							X			
	ONEUNITED BANK	X	X		3-22-04 P 9-27-04 S					X					
SP	ONEUNITED BANK	X	X		3-26-04 P 9-27-04 S					X					

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	CONGRESSIONAL FEDERAL CREDIT UNION	REVOLVING CHARGE ACCOUNT	X									
JT	WASHINGTON MUTUAL	Mortgage on 549 S.Lucerne Bl.							X			

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	National Assoc.of Real Estate Brokers, Nevada Chapter	Jan.23-24	Los Angeles-Las Vegas-Los Angeles	Y	N	Y	N
	Harvard Law School	March 12-13	Wash.,D.C.-Boston-Miami	Y	N	Y	N
	The People's Rights Fund, Inc. & Michigan Emer.Comm.Against War & Injustice	April 7-9	Wash.,D.C.-New York-Detroit-Los Angeles	Y	N	N	N
	UC Berkeley, Center for Latin American Studies	April 15	Los Angeles-Berkeley-Los Angeles	N	N	Y	N
	NAACP Western Region & Springfield College	April 30-May 2	Los Angeles-San Diego-Flagstaff	Y	N	N	N
	Greater New Mt.Moriah Missionary Baptist Church	June 6-7	Los Angeles-Detroit-Wash.,D.C.	Y	N	N	N
	Missouri Black Legislative Caucus	June 18-21	Wash.,D.C.-St.Louis-Wash.,D.C.	Y	N	Y	1 Day
	Durham Committee on the affairs of Black People	Aug.20-22	Los Angeles-Durham-Wash.,D.C.	Y	N	Y	N
	Sisters On Target, Inc.	Oct.16-17	Los Angeles-Des Moines	Y	N	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
President	Black Women's Forum
Director	Gourmet Services
Director	Minority AIDS Project
Director	Clara Elizabeth Jackson Carter Foundation, Spellman College
Director	African American 2000 and Beyond

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2006 98-723 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
2005 MAY -6 AM 9:22
U.S. HOUSE OF REPRESENTATIVES

Diane E. Watson
(Full Name)

5331 Harcourt Ave.
L.A., Calif. 90043
(Mailing Address)

Daytime Telephone
(323) 965-1422 (202) 225-7084

HAND DELIVERED MC
(Office Use Only)

Filer Status	☒ Member of the U.S. House of Representatives	State: California District: 33rd	☐ Officer or Employee — Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐	No ☒
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☐	No ☒	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☒	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☒	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Diane E. Watson	4-28-05

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	State of California	Legislative Pension	$6,000.00

For payments to charity in lieu of honoraria, use Schedule II.

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Name Charles B. Wilson | Page 3 of 4

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C	Speech	Feb. 2, 2004	$2,000
XYZ Magazine	Article	Aug. 13, 2004	$500
Mellon Financial	Speech	7-28-04	$2,000.00

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source		Block B: Value of Asset	Block C: Type of Income	Block D: Amount of Income	Block E: Transaction
			A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
SP, DC, JT	Examples: SP Mega Corp Stock		E	DIVIDENDS	IV	P
	Examples: Simon & Schuster		Indefinite	Royalties	IX	
	Examples: 1st Bank of Paducah, KY accounts		F	INTEREST	VI	
	Bank of Am. IRA		C		V	
	Bank of Am. Savings		C		VI	
	Thrift Plan		D		V	

For additional assets and unearned income, use next page.

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UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED
LEGISLATIVE RESOURCE CENTER
2005 MAY 13 PM 2:48
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only) MC

MELVIN L. WATT
(Full Name)

515 N.POPLAR ST CHARLOTTE, NC 28202
(Mailing Address)

202.225.1510
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives — State: NC, District: 12	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions–	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and wilfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Melvin L. Watt	5/12/2005

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SCHEDULE I - EARNED INCOME

Name MELVIN L. WATT

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
UNC AT CHARLOTTE	SPOUSE'S SALARY	N/A
MINBANC FOUNDATION, INC.	SPOUSE'S COMPENSATION	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name MELVIN L. WATT

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	ARIEL APPRECIATION FUND-IRA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	ARIEL APPRECIATION FUND-IRA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	CONGRESSIONAL FEDERAL CREDIT UNION	$1 - $1,000	INTEREST	$1 - $200	
	WESTSIDE 2000 LTD	$15,001 - $50,000	CAPITAL GAINS	NONE	
T	LOT - 515-517 N. POPLAR ST., CHARLOTTE, NC (1/2 INTEREST)	$15,001 - $50,000	CAPITAL GAINS	NONE	
	FIRST CLEARINGS, LLC	None	DIVIDENDS	$1 - $200	E

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name MELVIN L. WATT

	STATE EMPLOYEES RETIREMENT SYSTEM	$15,001 - $50,000	INTEREST	NONE	
	BIOGEN, INC	None	DIVIDENDS	NONE	S
	WACHOVIA SECURITIES	$15,001 - $50,000	INTEREST	$201 - $1,000	E
	PRUDENTIAL COMMAND MONEY FUND	None		NONE	E
	TEXAS INSTRUMENTS, INC	$1,001 - $15,000	DIVIDENDS	NONE	
	TIME WARNER	$1,001 - $15,000	DIVIDENDS	NONE	
	TRANSAMERICA LIFE	$1,001 - $15,000	INTEREST	NONE	
	EAST TOWNE MANOR, INC. (UNSECURED ADVANCES)	$1,001 - $15,000	INTEREST	NONE	
SP	SCHOOLWORKERS FEDERAL CREDIT UNION				E
SP	HALLWOOD REALTY PARTNERS	$1,001 - $15,000	CAPITAL GAINS	$1 - $200	
	HALLWOOD REALTY PARTNERS	None		NONE	S
	COLLEGE LIFE	$1 - $1,000	INTEREST	$1 - $200	
	MIDSOUTH CAPITAL GROUP	None		NONE	E
	EAST TOWNE MANOR, INC., REST HOME, (SUB-S CORP), CHARLOTTE, NC	$250,001 - $500,000	CAPITAL GAINS	$15,001 - $50,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name MELVIN L. WATT

	SCHOOLWORKERS FEDERAL CREDIT UNION				E
	NC EASTERN MUNICIPAL POWER BONDS	None	INTEREST	$201 - $1,000	S
	MECHANICS & FARMERS BANK	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	AT & T	$1,001 - $15,000	DIVIDENDS	NONE	
	EVERGREEN FUNDS-IRA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	ALLIANCE GROWTH FUND B	$1 - $1,000	DIVIDENDS	$1 - $200	
	OPPENHEIMER MAIN STREET GROWTH FUND B	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	EVERGREEN FUNDS-IRA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	DELPHI AUTOMOTIVE SYSTEMS	None	DIVIDENDS	$1 - $200	S
	GENERAL ELECTRIC CO	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	SCUDDER MUNI INCOME	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	DUKE ENERGY	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	BANK OF AMERICA	$50,001 - $100,000	DIVIDENDS	$2,501 - $5,000	
	SEA CONTAINERS	$1,001 - $15,000	DIVIDENDS	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name MELVIN L. WATT

	KRISPY KREME DOUGHNUTS, INC.	$1,001 - $15,000	DIVIDENDS	NONE	P
SP	PRUDENTIAL FINANCIAL-IRA ROLLOVER	$15,001 - $50,000	DIVIDENDS	NONE	
	WACHOVER SECURITIES - IRA (SELF-DIRECTED IRA) DENOTED BY "*"	None		NONE	E
	PRUDENTIAL SECURITIES IRA (SELF-DIRECTED IRA)	None		NONE	E
	PRUDENTIAL SECURITIES COMMAND MONEY FUND	None		NONE	E
	WACHOVIA SECURITIES MONEY Fund"*"	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	E
	AIM BLUE CHIP FUND A "*"	None		NONE	S
	AIM PRIME EQUITY FUND A "*"	None		NONE	S
	PARK PLAZA CONDO ASSOCIATES "*"	$15,001 - $50,000	CAPITAL GAINS	NONE	
	LUCENT TECHNOLOGIES "*"	$1 - $1,000	DIVIDENDS	NONE	
	MOTOROLA, INC "*"	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	NOKIA CORP ADR "*"	$1 - $1,000	DIVIDENDS	$1 - $200	
	RED HAT, INC "*"	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	CISCO SYSTEMS, INC "*"	$1,001 - $15,000	DIVIDENDS	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name MELVIN L. WATT

	AMAZON.COM, INC "*"	$1,001 - $15,000	DIVIDENDS	NONE	
	JEFFERSON PILOT CORP "*"	None		$1 - $200	S
	CHECKPOINT TECHNOLOGIES "*"	$1,001 - $15,000	DIVIDENDS	NONE	
	FLEXTRONICS, LTD "*"	$1,001 - $15,000	DIVIDENDS	NONE	
	GLOBAL TELESYSTEMS, INC "*"	None		NONE	E
	NASDAQ 100 TRUST "*"	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	SUN MICROSYSTEMS "*"	$1 - $1,000	DIVIDENDS	$1 - $200	
	DUKE ENERGY "*"	$1,001 - $15,000	DIVIDENDS	NONE	
	SOUTHERN CO "*"	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	HOME DEPOT, INC "*"	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	WORLDCOM "*"	None		NONE	E
	FREESCALE SEMICONDUCTOR "*"	$1 - $1,000	DIVIDENDS	NONE	P
	NUCOR CORP "*"	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	RYDEX SECTOR ROTATION FUND H "*"	$1,001 - $15,000	DIVIDENDS	NONE	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name MELVIN L. WATT

	EATON VANCE WORLDWIDE HEALTH SCIENCES [1] [2] [3]	$1,001 - $15,000	DIVIDENDS	NONE	P

SCHEDULE IV - TRANSACTIONS

Name MELVIN L. WATT

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	BIOGEN IDEC, INC	S	07/22/04	$1,001 - $15,000
	DELPHI CORP	S	05/13/04	$1,001 - $15,000
	N.C. EASTERN MUNICIPAL POWER	S	01/02/04	$1,001 - $15,000
	KRISPY KREME DOUGHNUTS, INC	P	06/29/04	$1,001 - $15,000
	AIM BLUE CHIP	S	02/11/04	$1,001 - $15,000
	AIM PREMIER EQUITY	S	02/11/04	$1,001 - $15,000
	JEFFERSON PILOT	S	04/29/04	$1,001 - $15,000
	JOHNSON & JOHNSON	PS	06/21/04	$1,001 - $15,000
	RYDEX TEMPEST 500	PS	06/02/04	$1,001 - $15,000
	SEMICONDUCTOR HOLDERS TRUST	PS	07/14/04	$1,001 - $15,000
	SOUTHERN CO OPTIONS	PS	04/27/047	$1,001 - $15,000
	VERISIGN, INC	PS	03/269/04	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name MELVIN L. WATT

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	JOHNSON & JOHNSON	PS	02/11/04	$1,001 - $15,000
	NUCOR CORP	P	06/02/04	$1,001 - $15,000
	RYDEX TEMPEST 500	PS	05/13/04	$1,001 - $15,000
	RYDEX TEMPEST 500	PS	08/10/04	$1,001 - $15,000
	SEMICONDUCTORS HOLDERS TRUST	PS	06/02/04	$1,001 - $15,000
	VERISIGN	PS	02/11/04	$1,001 - $15,000
	GLOBAL TELESYS INC	E	09/29/04	
	WACHOVIA SECURITIES	E	07/01/04	$0
	PRUDENTIAL COMMAND MONEY FUND	E	07/01/04	
	HALLWOOD REALTY PARTNERS	S	12/31/04	$1,001 - $15,000
	WACHOVER SECURITIES - IRA (SELF-DIRECTED IRA) DENOTED BY "*"	E	07/01/04	
	PRUDENTIAL SECURITIES IRA (SELF-DIRECTED IRA)	E	07/01/04	

SCHEDULE IV - TRANSACTIONS

Name MELVIN L. WATT

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	PRUDENTIAL SECURITIES COMMAND MONEY FUND	E	07/01/04	
	WACHOVIA SECURITIES MONEY Fund"*"	E	07/01/04	
	WORLDCOM "*"	E	12/31/04	
	FREESCALE SEMICONDUCTOR	P	06/30/04	$1,001 - $15,000
	RYDEX SECTOR ROTATION FUND H "*"	P	10/22/04	$1,001 - $15,000
	EATON VANCE WORLDWIDE HEALTH SCIENCES "*"	P	06/02/04	$1,001 - $15,000
SP	SCHOOLWORKERS FEDERAL CREDIT UNION	E	01/31/04	
	MIDSOUTH CAPITAL GROUP	E	01/01/04	
	SCHOOLWORKERS FEDERAL CREDIT UNION	E	01/01/04	

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name MELVIN L. WATT

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
THE HUMPTY DUMPTY INSTITUTE	JAN. 16-17	WASH., DC--NEW YORK--CHARLOTTE, NC	Y	Y	Y	2 DAYS
NATIONAL ACADEMY OF RECORDING ARTS AND SCIENCES	FEB. 6-9	CHARLOTTE, NC--LOS ANGELES, CA--WASH, DC	Y	N	N	NO
THE CONGRESSIONAL PROGRAM OF THE ASPEN INSTITUTE	FEB 17-22	CHARLOTTE, NC--CANCUN, MEXICO--CHARLOTTE, NC	Y	Y	Y	NO
CHRISTOPHER REYNOLDS FOUNDATION	MARCH 12/15	CHARLOTTE, NC--HAVANA, CUBA--CHARLOTTE, NC	Y	Y	N	NO
THE CONGRESSIONAL PROGRAM OF THE ASPEN INSTITUTE	APRIL 13-18	CHARLOTTE, NC--GREAT EXUMA ISLAND, BAHAMAS--CHARLOTTE, NC	Y	Y	Y	NO
THE CONGRESSIONAL PROGRAM OF THE ASPEN INSTITUTE	JUNE27-JULY 2	CHARLOTTE, NC--LAUSANNE, SWITZERLAND--CHARLOTTE, NC	Y	Y	Y	NO

SCHEDULE VIII - POSITIONS

Name MELVIN L. WATT

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
DIRECTOR	EAST TOWNE MANOR, INC., CHARLOTTE, NC
DIRECTOR	WESTSIDE 2000, LTD., CHARLOTTE, NC

FOOTNOTES

Name MELVIN L. WATT

Number	Section / Schedule	Footnote	This note refers to the following item
1	Schedule III	CLOSED	SCHOOLWORKERS FEDERAL CREDIT UNION
2	Schedule III	CLOSED	SCHOOLWORKERS FEDERAL CREDIT UNION
3	Schedule III	CLOSED/OUT OF BUSINESS	MIDSOUTH CAPITAL GROUP
4	Schedule III	NAME CHANGE	PRUDENTIAL MONEY FUND
5	Schedule III	NAME CHANGE	WACHOVIA CHANGE

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A For use by Members, officers, and employees

HAND DELIVERED

Representative Henry A. Waxman
(Full Name)

2204 Rayburn House Office Building Washington, DC 20515 — (Mailing Address)

202-225-3976 — Daytime Telephone:

2005 MAY 16 PM 5:13 — (Office Use Only)

Filer Status	☑ Member of the U.S. House of Representatives — State: CA, District: 30	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☐ No ☑	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☑ No ☐	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Henry A. Waxman	May 16, 2005

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SCHEDULE II - PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

Name Representative Henry A. Waxman

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
The Center for Business Intelligence	Speech	Jan. 26, 2004	$2,000
Consumer Healthcare Products Association	Speech	March 17, 2004	$2,000
International Foundation of Employee Benefit Plans	Speech	May 17, 2004	$2,000
The Center for Business Intelligence	Speech	July 19, 2004	$2,000
National Family Planning and Reproductive Health Association	Speech	Sept. 9, 2004	$2,000
Pharmaceutical Marketing Congress	Speech	Sept. 28, 2004	$2,000
Drug and Device Dialogue	Speech	Oct. 6, 2004	$2,000
The Center for Business Intelligence	Speech	Nov. 17, 2004	$2,000
Food and Drug Law Institute	Speech	Dec. 1, 2004	$2,000

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Representative Henry A. Waxman

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Fedelity Low Priced Stock (IRA)	$50,001 - $100,000	Dividends, interest & capital gains	$201 - $1,000	
JT	Fidelity Contrafund	$15,001 - $50,000	Dividends, interest & capital gains	$201 - $1,000	
JT	Fidelity Fund	$15,001 - $50,000	Dividends, interest & capital gains	$201 - $1,000	
JT	Fidelity Magellan	$15,001 - $50,000	Dividends, interest & capital gains	$201 - $1,000	
JT	I Bond	$1,001 - $15,000	INTEREST	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Representative Henry A. Waxman

JT	Seminole County, FL School Board Bond	$15,001 - $50,000	INTEREST	$201 - $1,000	S
SP	CA Health FFA Municipal Bond	$15,001 - $50,000	INTEREST	$201 - $1,000	
SP	CA State Board Municipal Bond	$15,001 - $50,000	INTEREST	$201 - $1,000	
SP	Concord, CA Redevelopment Agency Municipal Bond	$15,001 - $50,000	INTEREST	$201 - $1,000	S
SP	Desert Sands, CA Municipal Bond	$15,001 - $50,000	INTEREST	$201 - $1,000	S
SP	Vallejo CA Unified School District Municipal Bond	$15,001 - $50,000	Dividends, interest & capital gains	$201 - $1,000	
SP	US Treasury Note	$15,001 - $50,000	INTEREST	$201 - $1,000	
JT	Equity Income Fund T. Rowe Price	$15,001 - $50,000	Dividends, interest & capital gains	$201 - $1,000	S
JT	European Stock Fund T. Rowe Price	$1,001 - $15,000	Capital gains and dividends	$201 - $1,000	S
JT	International Stock Fund T. Rowe Price	$15,001 - $50,000	Dividends, interest & capital gains	$201 - $1,000	S
SP	Israel Bonds	$1,001 - $15,000	INTEREST	$201 - $1,000	P
JT	Israel Bonds	$1,001 - $15,000	INTEREST	$201 - $1,000	
SP	Vanguard Inflation-Protected Security Investment (Roth IRA)	$1,001 - $15,000	INTEREST	$201 - $1,000	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Representative Henry A. Waxman

SP	Vanguard Small Cap Index (Roth IRA)	$1,001 - $15,000	Dividends, interest & capital gains	$201 - $1,000	P
SP	Vanguard Small Cap Index Fund (IRA)	$15,001 - $50,000	Dividends, interest & capital gains	$201 - $1,000	
	Vanguard Short Term Investment Grade Fund (IRA)	$1,001 - $15,000	INTEREST	$201 - $1,000	
	Vanguard Inflation-Protected Security Investment (IRA)	$1,001 - $15,000	INTEREST	$201 - $1,000	P
	Vanguard European Stock Index (IRA)	$1,001 - $15,000	Dividends, interest & capital gains	$201 - $1,000	
	Vanguard 500 Index Fund (IRA)	$1,001 - $15,000	Dividends, interest & capital gains	$201 - $1,000	S
	Vanguard REIT Index Fund (IRA)	$50,001 - $100,000	Dividends, interest & capital gains	$201 - $1,000	
	Vanguard Pacific Stock Index (IRA)	$15,001 - $50,000	Dividends, interest & capital gains	$201 - $1,000	
	Vanguard REIT Index Fund (Roth IRA)	$1,001 - $15,000	Dividends, interest & capital gains	$201 - $1,000	P
JT	Vanguard Emerging Markets	$15,001 - $50,000	Dividends, interest & capital gains	$201 - $1,000	P
JT	Vanguard European Stock Index	$15,001 - $50,000	Dividends, interest & capital gains	$201 - $1,000	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Representative Henry A. Waxman

JT	Vanguard Extended Markets	$50,001 - $100,000	Dividends, interest & capital gains	$201 - $1,000	P
JT	Vanguard 500 Index Fund	$100,001 - $250,000	Dividends, interest & capital gains	$201 - $1,000	P
JT	Vanguard Pacific Stock Index	$15,001 - $50,000	Dividends, interest & capital gains	$201 - $1,000	P
JT	T. Rowe Price Equity Income	$15,001 - $50,000	Dividends, interest & capital gains	$201 - $1,000	S

SCHEDULE IV - TRANSACTIONS

Name Representative Henry A. Waxman

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SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	Vanguard Inflation-Protected Security Investment (Roth IRA)	P	3-16-04; 10-11-04	$1,001 - $15,000
JT	Vanguard Emerging Market Index	P	4-29-04; 10-28-04	$1,001 - $15,000
JT	Vanguard European Stock Index	P	4-26-04; 4-29-04; 7-29-04	$15,001 - $50,000
JT	Vanguard Extended Market	P	5-6-04; 7-8-04	$1,001 - $15,000
JT	Vanguard 500 Index Fund	P	2-11-04; 3-2-04; 3-11-04; 3-25-04; 4-26-04; 4-29-04; 5-3-04; 5-6-04; 7-8-04; 7-14-04; 7-16-04; 7-21-04; 7-29-04; 8-18-04	$50,001 - $100,000
JT	Vanguard Pacific Stock Index	P	4-26-04; 4-29-04; 6-25-04; 7-29-04; 8-3-04	$15,001 - $50,000
JT	Vanguard 500 Index Fund (IRA)	S	3-2-04; 11-4-04	$1,001 - $15,000
JT	Vanguard REIT	P	3-2-04	$1,001 - $15,000
	Vanguard Inflation-Protected Security Investment (IRA)	P	11-4-04	$1,001 - $15,000
JT	T. Rowe Price Equity Income Fund	S	4-20-04	$15,001 - $50,000

SCHEDULE IV - TRANSACTIONS

Name Representative Henry A. Waxman

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SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
JT	T. Rowe Price European Stock Fund	S	4-20-04	$1,001 - $15,000
JT	T. Rowe Price International Stock Fund	S	4-27-04	$15,001 - $50,000
SP	State of Israel Bond	P	11-1-04	$1,001 - $15,000
SP	Vanguard Small Cap Index Fund (Roth IRA)	P	2-16-04	$1,001 - $15,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Representative Henry A. Waxman

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
The Aspen Institute Congressional Program	May 22-30, 2004	Wash., DC-Barcelona, Spain-Wash., DC	Y	Y	Y	2 days
The Aspen Institute Congressional Program	June 27-July 5, 2004	Wash., DC-Lausanne, Switzerland-Wash., DC	Y	Y	Y	4 days
The Aspen Institute	August 21-30, 2004	Wash., DC-Venice, Italy-Wash., DC	Y	Y	Y	3 days
Pharmaceutical Marketing Congress	September 28, 2004	Wash., DC-Philadelphia, PA-Wash., DC	N	N	N	None

5500

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND-DELIVERED
2005 MAY 16 PM 1:03
MC
(Office Use Only)

Anthony Weiner
(Full Name)

80-02 Kew Gardens Road #5000 Kew Gardens, NY 11415 — 718-520-9001
(Mailing Address) — Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives — State: NY District: 09	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐ No ☑	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5/13/05

5501

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Anthony Weiner

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Baxter International Inc.	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Chesapeake Energy Corp.	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Walt Disney Company	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Earthlink Inc.	$1,001 - $15,000	NA	NA	
	General Motors	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Freddie Mac	$1,001 - $15,000	DIVIDENDS	$1 - $200	

	MCI Inc.	$1,001 - $15,000	NA	NA	
	Pfizer Inc.	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Rowan Cos.	$1,001 - $15,000	NA	NA	P
	Sabre Holdings Corp.	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Schering Plough Corp.	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	Sony Corp.	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Wachovia Corp	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	Sun Microsystems	$1,001 - $15,000	NA	NA	P
	Waste Management Inc.	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Washington Mutual	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Csc Holdings Inc.	$1,001 - $15,000	INTEREST/DIVIDENDS	$201 - $1,000	S
	Capline Cap Trust Iii Tides Conv Pfd.	$1,001 - $15,000	INTEREST	$1 - $200	S
	Capline Corp. Nt Bonds	$1,001 - $15,000	NA	NA	P

SCHEDULE IV - TRANSACTIONS

Name Anthony Weiner

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Wachovia Corp	P	2-17-04	$1,001 - $15,000
	Schering Plough Corp.	P	7-15-04	$1,001 - $15,000
	Csc Holdings Inc.	S	5-6-04	$1,001 - $15,000
	Capline Cap Trust Iii Tides Conv Pfd.	S	8-24-04	$1,001 - $15,000
	Capline Corp. Nt Bonds	P	8-30-04	$1,001 - $15,000
	Apple Computer Inc	S	11-29-04	$1,001 - $15,000
	Rowan Companies	P	10-12-04	$1,001 - $15,000
	Sun Microsystems	P	4-19-04	$1,001 - $15,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Anthony Weiner

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Confederation Of Indian Industry	Jan 5 - 11	New York - India - New York	Y	Y	N	N/A

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2005 MAY 16 PM 5:56
MC
(Office Use Only)

Wayne Curtis Weldon
(Full Name)

96 Tanguy Road
(Mailing Address)
Glen Mills, PA 19342

Daytime Telephone: (202) 225-2011

Filer Status	[X] Member of the U.S. House of Representatives — State: PA District: 7th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Curt Weldon	5-16-05

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Name	Page 2 of ___
Wayne Curtis Weldon	

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Drexel University	Approved Teaching Fee	20,000
	Crozer Chester Medical Center	Spouse Salary	N/A

For payments to charity in lieu of honoraria, use Schedule II.

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Name Wayne Curtis Weldon

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.

If you use a valuation method other than fair market value, please specify the method used.

If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP	SP	Mega Corp. Stock					X								X										X								P
DC,	Examples:	Simon & Schuster			Indefinite																Royalties									X			
JT		1st Bank of Paducah, KY accounts						X									X									X							
		Congressional Federal Credit Union			X												X						X										
		Franklin Mint Federal Credit Union		X													X						X										
SP		Crozer Chester Medical Center 403(b) Retire Plan			X										N/A							N/A											

For additional assets and unearned income, use next page.

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Name Wayne Curtis Weldon | Page 5 of __

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Congressional Federal Credit Union	Loan (Tuition Costs)	X									
	Federal Plus Student Loans	Loan (Tuition Costs)			X							
	Congressional Federal Credit Union	Car Loan		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required

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Name Wayne Curtis Weldon | Page 6 of

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Galaxy Tracking Systems	1/10-1/14	Philadelphia - London - Phil.	Y	N	N	N
	International Advisory Energy Council	7/30-8/1	Phil. - Yalta, UK - Phil.	Y	Y	N	N
	Analytical Graphics, Inc	8/17-8/18	Phil - Huntsville, AL - Jacksonville FL	Y	N	N	N
	E.J. Krause	9/13-9/14	Phil. - ~~Chicago - Wh~~ NYC - Phil	Y	N	N	N
	University of Texas at Dallas	1/23	Phil. - Dallas - BWI	N	N	N	N

This page may be copied if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
2005 MAY 10 PM 5:43
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED
(Office Use Only)

David J. Weldon, M.D.
(Full Name)

365 Newport Drive
(Mailing Address)

Indialantic, FL 32903-4031

Daytime Telephone: (202) 225-3671

Filer Status	[X] Member of the U.S. House of Representatives — State: FL District: 15	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

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II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

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EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Dan Weldon	May 10 2005

55511

Name David J. Weldon, M.D. | Page 2 of 4

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	Block A: Asset and/or Income Source	Block B: Value of Asset	Block C: Type of Income	Block D: Amount of Income	Block E: Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:* SP Mega Corp Stock	X	DIVIDENDS X	IV $1,001 – $2,500	P
	Simon & Schuster	Indefinite	Other Type of Income: Royalties	IX $100,001 – $1,000,000	
	1st Bank of Paducah, KY accounts	F $100,001 – $250,000	INTEREST X	VI $5,001 – $15,000	
	Thomas Nelson Publishers	Indefinite	QUALIFIED BLIND TRUST: Royalties	I None X	
	Congressional Federal Credit Union Account	C $1,001 – $15,000	INTEREST X	II $1 – $200	
	Space Coast Credit Union Account, Melbourne, FL	D $15,001 – $50,000	INTEREST X	II $1 – $200	
	Cartridge Source of America	D $15,001 – $50,000	INTEREST X	I None X	
SP	Liquid Asset Fund Morgan Stanley IRA Account	C $1,001 – $15,000	INTEREST X	II $1 – $200	
	Liquid Asset Fund Morgan Stanley IRA Account	C $1,001 – $15,000	INTEREST X	III $201 – $1,000	

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name David J. Weldon, M.D.

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
	Nextel Communications Inc. Notes				X											X								X							
	Ford Motor Credit Co. 7.25%				X											X								X							
	BAC CAP Trust IV 5.875%			X												X							X								
	Government National Mtg. Assn.				X											X								X							
	American Gr Fd of America					X								X			X							X							
	American Inv Co of America					X								X			X							X							P
	Templeton Foreign Fund					X								X			X							X							
	AIM Basic Value				X									X			X							X							
	Unit VK Focus Port Cohen & Steers				X									X			X							X							P
	Unit 10 Select 10 Industrial					X								X			X							X							P
	MS Spectrum Select				X									X		X	X						X								
	MS Spectrum Tech				X									X		X	X						X								
	Morgan Stanley - Cash		X													X					X										
	Bank of America Checking			X																	X										
	Chevy Chase Bank			X																	X										

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SCHEDULE IV — TRANSACTIONS

Name David J. Weldon, M.D.

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–04		X								
	American Inv Co of America C	X			03-05-04	X									
	Unit VK Cohen & Steers Reit 8	X			01-25-04	X									
	Unit VK Select 10 Industrial 2003-5		X		09-22-04			X							
	Unit VK Select 10 Industrial 2004-5	X			09-22-04			X							

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9

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED
2005 MAY 15 PM 1:20
(Office Use Only)

Gerald C Weller
(Full Name)
1309 Union Street
(Mailing Address)
Morris Illinois 60450
Daytime Telephone: 202-225-3635

Filer Status	[X] Member of the U.S. House of Representatives — State: ____ District: ____	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [X]	No [ ]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Gerald C Weller	May 13, 2005

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SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Congress of the Republic of Guatemala	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2004	$2,000
XYZ Magazine	Article	Aug. 13, 2004	$500
- None -			

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Name Gerald C. Weller | Page 4 of 9

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	Examples:	SP	Mega Corp. Stock				X								X										X								P
			Simon & Schuster			Indefinite															Royalties								X			
			1st Bank of Paducah, KY accounts					X									X									X							
			Prudential Jennison Growth Fund			X									X			X							X								
			Prudential Small Company Fund IRA			X									X			X				X											
			Prudential Equity Fund			X									X			X					X										
			Morris Community Credit Union					X									X							X									
			Congressional Federal Credit Union			X											X						X										
			First Community Bank of Joliet			X																X											P

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Gerald C. Weiler

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	115 D Street, SE #109 Washington DC	X													X		X											X				S
	1801 C Lisbon Road, Morris	X													X		X										X					S
	1335 S. Prairie Avenue, Chicago								X						X												X					P
	Lot 1, San Juan del Sur Nicaragua						X										N/A								N/A							
	Lot 2, San Juan del Sur Nicaragua					X											N/A								N/A							P
	1309(A) Union Street, Morris (Bank. this is a former rental property converted to personal residence on 7/1/04					X									X									X								

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SCHEDULE IV — TRANSACTIONS

Name Gerald C. Weiler | Page 6 of 9

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-04		X								
	5000 Shares of First Community Bank of Joliet Illinois	X			6/30/04		X								
	1335 S Prairie Avenue, Chicago	X			1/7/04						X				
	Lot 2, San Juan Del Sur Nicaragua	X			4/11/04			X							
	115 D Street, SE Washington DC #109		X		4/8/04					X					
	1801C Lisbon Road, Morris		X		7/28/04			X							

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Name Gerald C. Weller | Page 7 of 9

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	USA Bank	Mortgage on 1335 S Prairie, Chicago		X								
	GMAC Mortgage	Mortgage on 1335 S Prairie Chicago					X					

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
	-none-	

Use additional sheets if more space is required.

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	International Republican Institute	4/17/04 - 4/20/04	Chicago - Mexico - Washington DC	Y	Y	N	N
	Dominican Association of Free Zones	4/23/04 - 4/27/04	DC - Dominican Republic - DC	Y	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprnse, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Congressional Board Of Advisors	Congressional Youth Leadership Council

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	- none -	

GPO: 2005 98-729 (mac)

Use additional sheets if more space is required.

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LEGISLATIVE RESOURCE CENTER
2005 MAY 12 PM 4:48
HOUSE OF REPRESENTATIVES
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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

LEON (LYNN) ACTON WESTMORELAND JR
(Full Name)

25 BRETT'S BEND SHARPSBURG, GA 30277 202-225-5901
(Mailing Address) Daytime Telephone:

Filer Status	☒ Member of the U.S. House of Representatives — State: GEORGIA District: 8	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A *$200 penalty* shall be assess against anyone who files more th 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐	No ☒
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒	No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Lynn A Westmoreland	5/12/05

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Name LYNN WESTMORELAND | Page 1 of 1

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
GEORGIA GENERAL ASSEMBLY	LEGISLATIVE SALARY	21,200.00
GLEN GROVE DEVELOPMENT, INC	SALARY	21,500.00
GLEN GROVE DEVELOPMENT, INC	K-1 EARNING	68,204.00
SOUTHEASTERN US CAPTIVE INSURANCE, INC	ADVISORY BOARD	4,500.00

For payments to charity in lieu of honoraria, use Schedule II.

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Name LYNN WESTMORELAND | Page 1 of 1

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2004	$2,000
XYZ Magazine	Article	Aug. 13, 2004	$500
NONE			

This page may be copied if more space is required.

Name LYNN WESTMORELAND | Page 1 of

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S) or exchanged (E) in reporting year.

	Block A		Block B												Block C							Block D											Block E
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	
SP, DC, JT	*Examples:* SP	Mega Corp. Stock					X								X										X								P
	DC	Simon & Schuster		Indefinite																	Royalties								X				
	JT	1st Bank of Paducah, KY accounts						X									X									X							
JT	CABIN CLARKSVILLE, GA								X												2nd RESIDENCE	X											
JT	RENTAL PROPERTY 42 CREEKSIDE, NEWNAN GA							X								X										X							
JT	RENTAL PROPERTY - SOLD DURING YR 19 CREEKSIDE, NEWNAN, GA							X								X								X									S
	IRA				X										X		X							X									
SP	IRA				X										X		X							X									
JT	565 AC - HARRIS CO GA										X											X											

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name LYNN WESTMORELAND

Page 1 of

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK Transaci P, S, E
JT	97 AC GRANTVILLE, GA								X												X											P

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Name LYNN WESTMORELAND | Page 1 of 1

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-04		X								
JT	SOLD RENTAL PROPERTY, 19 CREEKSIDE NEWNAN, GA		X		10-25-04				X						
JT	PURCHASE 97 ac PROPERTY, GRANTVILLE, GA	X			9-20-04						X				

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Name LYNN WESTMORELAND | Page 1 of 6

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
JT	WELLS FARGO	MORTGAGE ON CABIN, CLARKSVILLE, GA				X						
JT	CHASE MANHATTAN, Louisville, Ky	MORTGAGE ON 42 CREEKSIDE, NEWNAN				X						
JT	CHASE MANHATTAN, Louisville Ky	SOLD DURING YEAR MORTGAGE ON 19 CRESCENT, NEWNAN				X						
JT	FORD MOTOR CREDIT	VEHICLE LOAN		X								
	SEE ATTACHED											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
	NONE	

Use additional sheets if more space is required.

Schedule V - Liabilities
Attachment, continued

SP, DC, JT	Creditor	Type of Liability	Amount of Liability B	C $15,001-$50,000	D	E $100,001-$250,000	F	G $500,001-$1,000,000	H	I $5,000,001-$25,000,000	J	K Over $50,000,000
JT	Bank of Coweta, Newnan, Ga	Personal Mortgage, 25 Bretts Bend Newnan, Ga				X						
JT	Bank of Coweta, Newnan, Ga	565 ac, Harris Co, Ga Property Loan							X			
JT	Bank of Coweta, Newnan, Ga	97 ac, Grantville, Ga Property Loan					X					

Name LYNN WESTMORELAND | Page 1 of _

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, a the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid direc by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under t Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expens
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
			NONE				

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
BOARD MEMBER	SOUTHEASTERN US CAPTIVE INSURANCE, INC
OFFICER	GLEN GROVE DEVELOPMENT, INC

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NONE	

GPO: 2005 98-729 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

HOUSE ARCHIVE RESOURCE CENTER
2005 MAY 16 PM 2:34
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only) MC

Robert Wexler
(Full Name)

7370 Viale Caterina
(Mailing Address)

202 225 3001
Daytime Telephone

Delray Beach FL 33446

Filer Status	☒ Member of the U.S. House of Representatives	State: Florida District: 19	☐ Officer or Employee	Employing Office
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☒	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒	No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Robert A Wexler	5/11/05

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SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples.	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	American Jewish Committee	Spouse Salary	NA
	Association for Safe International Road Travel	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2004	$2,000
XYZ Magazine	Article	Aug 13, 2004	$500
NONE			

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Name Robert Wexler

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B: None	$1 – $1,000	$1,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $250,000	$250,001 – $500,000	$500,001 – $1,000,000	$1,000,001 – $5,000,000	$5,000,001 – $25,000,000	$25,000,001 – $50,000,000	Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify; For Example, Partnership Income or Farm Income)	Block D: None	$1 – $200	$201 – $1,000	$1,001 – $2,500	$2,501 – $5,000	$5,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $1,000,000	$1,000,001 – $5,000,000	Over $5,000,000	Block E: P, S, E
SP		SP	Mega Corp. Stock					X							X										X							P
DC,	*Examples:*		Simon & Schuster			Indefinite															Royalties								X			
JT			1st Bank of Paducah, KY accounts					X									X										X					
	Orbus					X												X				X										
	4 statscom			X														X				X										Valueless

For additional assets and unearned income, use next page.

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Name Robert Wexler

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–04		X								
	NONE														

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	MBNA America Bank, Wilmington DE	Revolving Charge Account	X									
	Citibank, South Dakota	Revolving Charge Account		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
NONE		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Project Interchange/ American Jewish Committee	Nov. 6–12, 2004	Washington–Jordan–Israel–Washington	Y	Y	N	NO
	International Management Development Institute	Apr. 13–18, 2004	Washington–Slovakia–Hungary–Washington	Y	Y	Y	NO

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
	NONE

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NONE	

GPO: 2005 98-729 (mec)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RECORDS CENTER
2005 JUN 10 PM 2:12
MC
(Office Use Only)

Wayne Edward Whitfield
(Full Name)

301 Cannon House Office Building Washington, DC 20515
(Mailing Address)

202-225-3115
Daytime Telephone:

Filer Status: ☑ Member of the U.S. House of Representatives — State: KY District: 01 ☐ Officer Or Employee — Employing Office: U.S. HOUSE OF REPRESENTATIVES

Report Type: ☑ Annual (May 15) ☐ Amendment ☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑ No ☐
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐		**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Ed Whitfield	6-8-2005

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SCHEDULE I - EARNED INCOME

Name Wayne Edward Whitfield

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
CSX Corporation	Retirement Benefit	$16,000

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Wayne Edward Whitfield

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	AOL Time Warner	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	AT & T	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	S
	C & K Drilling (Changed name to TEPPCO)	$1,001 - $15,000	CAPITAL GAINS	$1 - $200	
	Chase Manhattan (JPM)	$1,001 - $15,000	DIVIDENDS	$1 - $200	S
	Chevron Stock	$100,001 - $250,000	DIVIDENDS	$2,501 - $5,000	
	Cisco	$1,001 - $15,000	DIVIDENDS	$1 - $200	

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	Citi Corp	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Coastline Credit Union	$1 - $1,000	INTEREST	$1 - $200	
	Coca-Cola	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	Commerical Real Estate -- Huntington Beach, CA (Located on Chemical Lane)	$100,001 - $250,000	RENT	$5,001 - $15,000	
	Congressional Credit Union	$1,001 - $15,000	INTEREST	$1 - $200	
	CSX (401 K)	$100,001 - $250,000	INTEREST//DIVIDENDS	$201 - $1,000	E (For Charles Schwab IRA)
	CSX Corp. Bond	$1,001 - $15,000	INTEREST	$201 - $1,000	
	Duke Energy	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Exxon	$100,001 - $250,000	DIVIDENDS	$2,501 - $5,000	
	Fidelity Blue Chip Fund	$15,001 - $50,000	CAPITAL GAINS	$1 - $200	
	Fidelity IRA	$100,001 - $250,000	INTEREST/CAPITAL GAINS	$1,001 - $2,500	
	Flavor X	$15,001 - $50,000			
	General Electric	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	
	Hewlett- Packard	$1,001 - $15,000	DIVIDENDS	$1 - $200	

	Intel	$50,001 - $100,000	DIVIDENDS	NONE	
	Marshall Isley Bank	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Maxim Integrated Pro.	$1,001 - $15,000	DIVIDENDS	$1 - $200	S
	May Department Store	$100,001 - $250,000	DIVIDENDS	$2,501 - $5,000	
	MedCo Health Solutions	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	Nokia **Stock Partially Sold in 2002.	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Northwestern Annuity	$1,001 - $15,000	DIVIDENDS/INTEREST	$1 - $200	
	Oak Aoc. Growth Fund	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$1 - $200	
	Old Republic International	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	Payless Shoes **Stock partially sold in 2002.	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	Pfizer	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Rental Property - Vista Del Lido, Newport Beach, CA (Residential Condominium)	$100,001 - $250,000	RENT	$15,001 - $50,000	
	Riggs Bank	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Schering-Plough	$1,001 - $15,000	DIVIDENDS	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Wayne Edward Whitfield

	Schwab Account Cash	$1 - $1,000	INTEREST	$1 - $200	
	Schwab IRA (A)	$250,001 - $500,000	DIVIDENDS/INTEREST	$201 - $1,000	
	Scwab IRA (B)	$100,001 - $250,000	DIVIDENDS/INTEREST	$201 - $1,000	
	Texas Instrument	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	S
	TIA-CREFF	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	US Government Thrift	$100,001 - $250,000	DIVIDENDS/INTEREST	$201 - $1,000	
	United Bank	$1,001 - $15,000	INTEREST	$1 - $200	
	Vacant Lot--Greenbrier Sporting Club--Travelers Hill, White Sulfur Springs, WV (Lot 26)	$100,001 - $250,000			
	Vacant Lot--Madisonville, KY (Dempsy Street, a little over one acre)	$1,001 - $15,000			
	Vanguard GNMA	$15,001 - $50,000	DIVIDENDS/CAPITAL GAINS	$1 - $200	
	Vanguard Midcap Index	$15,001 - $50,000	DIVIDENDS/INTEREST	$1 - $200	
	Vanguard S&P 500 Fund	$100,001 - $250,000	DIVIDENDS/CAPITAL GAINS	$1 - $200	
	Vanguard Tax Managed Fund	$15,001 - $50,000	DIVIDENDS/INTEREST	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Wayne Edward Whitfield

	Williams Energy Stock	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Xerox	$1 - $1,000	DIVIDENDS	$1 - $200	

SCHEDULE IV - TRANSACTIONS

Name Wayne Edward Whitfield

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	At & T	S	10-07-04	$15,001 - $50,000
	JPM Chase Manhattan	S	9-28-04	$1,001 - $15,000
	CSX (401 K) for Charles Schwab IRA	E	9-18-04	$100,001 - $250,000
	Maxim Integrated PM	S	7-10-04	$1,001 - $15,000
	Texas Instrument	S	9-14-04	$1,001 - $15,000
	Old Republic International	P	10-05-04	$1,001 - $15,000
	MedCo Health Solution	P	03-07-04	$1,001 - $15,000

SCHEDULE V - LIABILITIES

Name Wayne Edward Whitfield

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	BB & T Bank – Charleston, WV	Mortgage - Lot 26 Greenbriar, White Sulfur Springs, WV	$100,001 - $250,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Wayne Edward Whitfield

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
National Thoroughbred Racing Association	Jan. 25-27	Fort Lauderdale	Y	Y	N	NA
Ripon Educational Fund	Nov. 3-12	DC--Budapest, Hungary--DC	Y	Y	Y	Nov. 4-7

SCHEDULE VIII - POSITIONS

Name Wayne Edward Whitfield

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board of Governors	Wesley Theological Seminary, Washington DC

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

THE RESOURCE CENTER
2005 MAY 16 PM 1:38
(Office Use Only)

MC

Roger F. Wicker
(Full Name)

2455 Rayburn Building Washington, DC 20515
(Mailing Address)

202-225-4306
Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives — State: MS District: 01	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15) ☐ Amendment	☐ Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐ No ☑	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics In Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. §-1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Roger Wicker	5/16/05

5553

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Roger F. Wicker

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	511 Bashford Lane, Alexandria, VA	$250,001 - $500,000	RENT	$5,001 - $15,000	
SP	Peoples Bank Stock	$1 - $1,000	DIVIDENDS	$1 - $200	
	Furniture Brands International Stock	$1,001 - $15,000	DIVIDENDS	NONE	
JT	Schering-Plough Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
DC	Schering-Plough Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Lucent Technologies Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Roger F. Wicker

	Avaya Stock	$1 - $1,000	DIVIDENDS	NONE	
	Amazon.com Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Putnam Growth IRA	$15,001 - $50,000	NA	NONE	
	Bio-Key Stock	$1 - $1,000	DIVIDENDS	NONE	
SP	American Funds IRA	$1,001 - $15,000	NA	NONE	

SCHEDULE V - LIABILITIES

Name Roger F. Wicker

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Chevy Chase Bank, MD	Mortgage on 511 Bashford Lane, Alexandria, VA	$100,001 - $250,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Roger F. Wicker

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Aspen Institute	Aug. 22-27	Memphis, TN --Venice--Memphis	Y	Y	Y	N/A
American Shipbuilding Assoc.	Nov30-Dec 2	Memphis, TN --Naples, FL -- Memphis, TN	Y	N	Y	N/A
Aspen Institute	Jan5-11	Memphis, TN -- Honolulu, HI -- Memphis, TN	Y	Y	Y	N/A

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
2005 MAY 16 PM 3:24
HAND DELIVERED
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

Heather Wilson
(Full Name)

20 First Plaza Suite 603
(Mailing Address)

Albuquerque NM 87102

505-346-6781
Daytime Telephone

202 225-6316

(Office Use Only)

MC

Filer Status	☒ Member of the U.S. House of Representatives — State: NM District: 01	☐ Officer or Employee — Employing Office:	A ***$200 penalty*** **shall be assessed against anyone who files more than 30 days late.**
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☒	No ☐	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐	No ☒
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☒	No ☐
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒	No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Heather Wilson	5-15-05

5558

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	NM Air Guard, Albuquerque, NM	Spouse Salary	NA
	Hone Law Firm, Albuquerque, NM	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2004	$2,000
	XYZ Magazine	Article	Aug. 13, 2004	$500
	New Mexico Medical Society Albuquerque NM	Speech	May 14, 2004	$75

This page may be copied if more space is required.

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Name Heather Wilson | Page 4 of 8

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B		Block C		Block D		Block E
SP, DC, JT	Examples:	SP	Mega Corp. Stock	Indefinite	DIVIDENDS	X			P
			Simon & Schuster		RENT				
			1st Bank of Paducah, KY accounts		INTEREST	X			
					CAPITAL GAINS				
					EXCEPTED TRUST				
					QUALIFIED BLIND TRUST				
					Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Royalties			

	Block A	Block B	Block C	Block D	Block E
	Checking Acct, Bal A, NM	$15,001 – $50,000	INTEREST	$1 – $200	
	Checking Acct, Bal A, Texas	$15,001 – $50,000	INTEREST	$1 – $200	
	Condo Apartment 4701 Cathedral Ave NW Wash DC	$250,001 – $500,000	RENT	$15,001 – $50,000	
	Schwab SEP IRA	See Attch			
SP	House 4016 Lafayette NE, ABQ	$100,001 – $250,000	RENT	$5,001 – $15,000	
SP	6 unimproved lots, Valencia Co, NM	$15,001 – $50,000		$1 – $200	

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Heather Wilson

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	Unimproved lot, Estate Co NM				X																X											
SP	Hone Law Firm					X															X											
SP	Sandia Area Federal C.U			X												X						X										
SP	Bank of the West	X														X						X										
SP	Wells Fargo Checking				X											X						X										
SP	Kirtland Area Fed Credit Union		X													X						X										
SP	Rodey Law Firm 401(k)					X															X											
SP	T Rowe Price Tax Free Int Fund																															
SP	T Rowe Price Prime Reserve				X									X									X									
SP	T Row Price High Yield																															
SP	Schwab One	See Atch																														
SP	TD Waterhouse	See Atch																														
DC	Schwab Investment Accounts	See Atch																														
DC	Schwab Investment Accounts	See Atch																														
SP	Schwab SEP IRA	See Atch																														
SP	Schwab IRA	See Atch																														
SP	House, 731 Player Loop Rio Rancho NM						X								X											X						
SP	House, 5433 Hayes Un Alb NM						X								X											X						
SP	House, 6737 Ranchitos, NS, Alb NM	X																			X											S
SP	Bank of Albuquerque Checking Acct			X												X						X										
SP	Prudential Financial IRA						X		See Atch																							
SP	House, 6711 Hayes Heights, Un, Alb NM						X								X											X						P

This page may be copied if more space is required.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Heather Wilson

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
SP	House 2700 Vista Grande Ln Unit 41, ABQ		RENT	V	P
SP	House, 500 Fitzgerald Ln ABQ NM	A		I	P, S
SP	Real Estate Contract, 6757 Rendulo NE	D	Other Type of Income: Real estate contract payoff	VI	P
SP	House, 1079 Skywatcher NW ABQ NM	F		I	P
SP	House, 41 Navajo Rd Edgewood NM	E	RENT	IV	P
SP	Oppenheimer	C	See Atch		P

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SCHEDULE IV — TRANSACTIONS

Name Heather Wilson

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-04		X								
SP	House, 6737 Ponderitos, NE, Alb NM		X		1-27-04			X							
SP	House, 6711 Mesa Marjosa NW, ABQ NM	X			4-6-04				X						
SP	House, 2700 Vista Grande NE #44 ABQ NM	X			5-26-04			X							
SP	House, 800 Fitzgerald NW, ABQ NM	X			2-27-04			X							
SP	House, 800 Fitzgerald NW, ABQ NM		X		4-14-04				X						
SP	House, 10701 Sagebrush NW, ABQ NM	X			12-3-04			X							
SP	House, 41 Navajito Rd, Edgewood, NM	X			4-7-04		X								

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Washington Mutual, Milwaukee WI	Mortgage on 4701 Conn. Ave DC			X							
SP	National City Mortgage, Dayton OH	" " 931 Player Loop				X						
SP	" "	" " 5433 Hayes				X						
SP	Wells Fargo, Albuquerque	Line of Credit/House				X						
SP	National City Mortgage, Dayton OH	Mortgage on 6711 Mesa Mariposa				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
None		

Use additional sheets if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
None	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
Continuing	State of NM, Public Employees Retirement System	4 years earned service in PERA. Vesting at 5 years. No payments currently received

GPO: 2005 98-729 (mac)

Use additional sheets if more space is required.

charles SCHWAB H. Wilson SEP IRA

Account Statement
Retain for Your Records

Statement Period: December 1, 2004 to December 31, 2004
Last Statement: November 30, 2004

Schwab Independent Investing | Foundational™

Account Opened In: 1993
Page 1

Simplified Employee Plan
Account Number:

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Banking Inquiries: Call 1-800-435-4000

31/12-BNCA1808-005689-SML-871141718002 482017 *2
HEATHER ANN WILSON
UTA CHARLES SCHWAB & CO INC
[redacted]

005689

Account Value Summary	
Cash, Money Market, and Deposit Accounts	$ 10,863.90
Investments	$ 17,997.19
Total Account Value	**$ 28,861.09**

Change in Value Summary	
Change in Value Since November 30, 2004:	$ (561.85)
Change in Value Since January 1, 2004:	$ (7,476.03)

Rate Summary	
Deposit Accounts: Interest rate as of 12/31 *(Z)*	0.55%
Schwab MMF	1.50%

Investment Detail

Description	*Symbol*	*Quantity Long/Short*		*Price*	*Market Value*
Cash, Money Market, and Deposit Accounts					
DEPOSIT ACCOUNTS *(X,Z)*					$ 785.98
SCHWAB MONEY MARKET FUND	SWMXX	10,077.9200	L	$ 1	10,077.92
Investments					
A T & T CORP NEW ODDLOT OFFER EXP: 12/22/04	T	30	L	$ 19.0600	$ 571.80
CELLSTAR CORP NEW	CLST	200	L	4.4500	890.00
COMCAST CORP NEW CL A	CMCSA	48	L	33.2800	1,597.44
DRDGOLD LTD ADR F SPONSORED ADR 1ADR REP 1 ORD	DROOY	2,000	L	1.5400	3,080.00
HOLLIS EDEN PHARM INC	HEPH	500	L	9.4200	4,710.00
INTEL CORP	INTC	205.3162	L	23.3900	4,802.35
MUSE TECHNOLOGIES INC	MUZE	2,000	L	0.0001	0.20
SHAMAN PHARMACEUTCLS NEW	SHPH	1	L	0.0001	
SOLECTRON CORP DEL	SLR	433	L	5.3300	2,307.89
TAKEOUTMUSIC.COM NEW	TKMU	120	L	0.0001	0.01
V P G I CORPORATION	VPGI	250	L	0.1500	37.50

Please see "Footnotes for Your Account" section for an explanation of the footnote codes and symbols on this statement.

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SIPC

Charles SCHWAB

Account Statement
Retain for Your Records

Simplified Employee Plan
Account Number:

H Wilson SEP IRA

Statement Period: December 1, 2004 to December 31, 2004
Page 2

Investment Detail (continued)

Description	Symbol	Quantity Long/Short		Price	Market Value
Investments (continued)					
SPIEGEL INC CL A NON-XXX REGISTRATION REVOKED BY THE SEC EFF 07/23/04		2,000	L	N/A	N/A
1ST UTD METHDIST 8.50%05 GENL MTG BD DUE 03/01/05 SER 1995 A 7		10,000	L	N/A	N/A
Total Account Value (excludes unpriced securities)					**$ 28,861.09**

Transaction Detail

Settle Date	Trade Date	Transaction	Description	Quantity	Price	Total
Cash, Money Market, and Deposit Accounts Activity						
12/01	12/01	Qualified Dividend	INTEL CORP			$ 8.21
12/16	12/15	Bank Interest (X,Z)	BANK INT 111604-121504			0.27
12/31	12/31	Dividend	SCHWAB MONEY MARKET FUND			17.34
Investments Activity						
12/08	12/08	Name Change	DRDGOLD LTD ADR F SPONSORED ADR	2,000		
12/08	12/08	Name Change	DURBAN RDPT DP ADR XXX N/C TO DRDGOLD LTD ADR	(2,000)		

Money Funds Detail

Settle Date	Transaction	Quantity	Price	Purchase/Debit	Sale/Credit
Money Market Funds (Sweep) Activity					
SCHWAB MONEY MARKET FUND Activity					
Opening Shares of SCHWAB MONEY MARKET FUND were 10,060.58					
12/31	Dividend	17.3400	$ 1	$ 17.34	
Closing Shares of SCHWAB MONEY MARKET FUND were 10,077.92					
	Total Money Market Funds (Sweep) Activity			**$ 17.34**	**$ 0.00**

SCHWAB MMF 1.370%

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BACA1508-005689 4/3/01

Charles SCHWAB

Account Statement
Retain for Your Records

Simplified Employee Plan H. Wilson SEP IRA
Account Number:

Statement Period: December 1, 2004 to December 31, 2004

Charles Schwab Bank, N.A. Deposit Accounts Activity

Trans Date	Transaction	Description	Withdrawal	Deposit
		Opening Balance *(X,Z)*		$ 777.50
12/02	Auto Transfer	BANK CREDIT FROM BROKERAGE *(X)*		$ 8.21
12/15	Interest Paid *(X,Z)*	BANK INTEREST		0.27
		Total Activity	$ 0.00	$ 8.48
		Ending Balance *(X,Z)*		$ 785.98

Deposit Accounts: Interest rate as of 12/31 was 0.55%. Your interest period was 11/16/04 - 12/15/04. (Z)

Contribution Summary

	2003	2004
SEP IRA	$ 0.00	$ 0.00
Year to Date Total:	$0.00	$0.00

Income Summary

Description	This Period	Year to Date
Deposit Accounts Interest	$ 0.27	$ 0.51
Money Funds Dividends	17.34	68.60
Cash Dividends	8.21	61.36
Total Income	$ 25.82	$ 130.47

Footnotes For Your Account

X Balances held at Charles Schwab Bank, N.A., member FDIC.

Z Please note that the interest is paid for a period that differs from the Statement Period. Bank balances include any interest that Charles Schwab Bank, N.A. paid as indicated on the Deposit Accounts Activity page. Bank balances do not include any interest that may have accrued during the Statement Period after interest is paid. The interest paid may include interest that accrued in the prior Statement Period.

7 Alternative Investments: Price is provided for informational purposes only and is the initial purchase price or the most recent price received from a third party, and, in either instance, may not represent the current market value. See the "Addendum to the Agreement Non-Standard Assets" for details on pricing policies. If you have sold or transferred this asset, please contact Charles Schwab & Co., Inc. and, if applicable, your investment advisor.

Please see "Footnotes for Your Account" section for an explanation of the footnote codes and symbols on this statement.

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BNCA1808-005688 482019

SIPC

charles SCHWAB

Spouse Schwab One

Account Statement
Retain for Your Records

Statement Period: December 1, 2004 to December 31, 2004
Last Statement: November 30, 2004

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Schwab One® Account
Account Number:

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Account Opened in: 1990
Page 1

31712-CNCQ2708-007334-SML-871840665006 1514796 *2
JAY R HONE
[redacted]

007334

Account Value Summary	
Cash & Sweep Money Market Funds	$ 5,903.32
Investments	$ 34,776.49
Total Account Value	**$ 40,679.81**

Change in Value Summary	
Change in Value Since November 30, 2004:	$ 2,043.19
Change in Value Since January 1, 2004:	$ 1,302.50

Margin Account Information	
Margin Account Equity	$ 40,675.00
Funds Available Margin	$ 30,244.00

Rate Summary	
Margin Loan Rate	5.25% to 8.75%

Investment Detail

Description	Symbol	Quantity Long/Short		Price	Market Value
Cash and Money Market Funds (Sweep)					
CASH					$ 5,903.32
Investments					
A T & T CORP NEW (M) ODDLOT OFFER EXP: 12/22/04	T	200	L	$ 19.0600	$ 3,812.00
COMCAST CORP NEW CL A (M)	CMCSA	323	L	33.2800	10,749.44
HOME DEPOT INC (M)	HD	300	L	42.7400	12,822.00
LORAL SPAC & COMMUN NEWF	LRLSQ	30	L	0.1700	5.10
MEDCOHEALTH SOLUTIONS (M)	MHS	14	L	41.6000	582.40
MERCK & CO INC (M)	MRK	120	L	32.1400	3,856.80
PRICELINE.COM INC NEW (M)	PCLN	125	L	23.5900	2,948.75
SPIEGEL INC CL A NON-XXX REGISTRATION REVOKED BY THE SEC EFF 07/23/04		2,000	L	N/A	N/A
		Less: Margin Loan Outstanding			$ 0.00
		Total Account Value (excludes unpriced securities)			**$ 40,679.81**

Please see "Footnotes for Your Account" section for an explanation of the footnote codes and symbols on this statement.

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charles SCHWAB

Account Statement
Retain for Your Records

Schwab One® Account
Account Number:

Spouse Schwab One

Statement Period: December 1, 2004 to December 31, 2004
Page 2

Transaction Detail

Settle Date	Trade Date	Transaction	Description	Quantity	Price	Total
Cash Activity						
12/16	12/16	Qualified Dividend	HOME DEPOT INC			$ 25.50
12/30	12/30	Credit Interest	SCHWAB1 INT 11/29-12/29			4.79

11/29 through 12/29. $4.79 based on .973% average Schwab One interest rate paid on 31 days in which your account had an average daily balance of $5,886.72.

Dividends Pending

Payable Date	Transaction	Description	Quantity	Rate Per Share	Share Distribution	Cash Distribution
01/03	Qualified Dividend	MERCK & CO INC	120	0.3800		$ 45.60

Pending transactions are not included in account value.

Income Summary

Description	This Period	Year to Date
Federally Taxable		
Schwab One Interest	$ 4.79	$ 10.32
Cash Dividends	25.50	466.30
Total Income	**$ 30.29**	**$ 476.62**

Footnotes For Your Account

(M) Assets held in margin account.

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CNCC2708-007334 1514787

SIPC

Waterhouse

TD Waterhouse Investor Services, Inc.
100 Wall Street
New York, NY 10005-3701
tdwaterhouse.com
Member NYSE/SIPC

ACCOUNT STATEMENT

Spouse TD Waterhouse

ACCOUNT NO.	LAST STATEMENT	PERIOD ENDING	PAGE
	10/29/2004	12/31/2004	1 OF 4

51 056 XXX YNNN 2 42430 11661 001/004
JAY R HONE
[redacted]

BRANCH INFORMATION

THE SHOPS AT PARK SQUARE
6600 INDIAN SCHOOL RD STE L
ALBUQUERQUE, NM 87110

CUSTOMER SERVICE: (800) 934-4448

PORTFOLIO VALUE SUMMARY

ASSET ALLOCATION
DECEMBER 31, 2004

	THIS PERIOD	%	LAST PERIOD	%
MONEY MARKET ACCT - FDIC	$40.06	.5	$ 30.04	.4
MONEY MARKET FUND	2,045.58	25.8	2,040.75	26.7
STOCKS	5,847.50	73.7	5,565.00	72.9
FIXED INCOME				
OPTIONS				
MUTUAL FUNDS				
UNIT INVESTMENT TRUSTS				
TOTAL PORTFOLIO VALUE	$7,933.14	100.0	$7,635.79	100.0

PORTFOLIO POSITIONS LONG

ACCT	QUANTITY	DESCRIPTION	SYMBOL	MARKET PRICE	MARKET VALUE	PORT PCT	DIV OR INT %	EST. ANNUAL INCOME
		CASH & CASH EQUIVALENTS						
CASH	40.06	TD WATERHOUSE BANK MONEY MARKET ACCOUNT*		1.000	40.06	0.5	0.40	0
CASH	2,045.58	TD WATERHOUSE MONEY MARKET PORTFOLIO (SWEEP)	CMFMZ	1.000	2,045.58	25.8	1.53	31
		TOTAL - CASH & CASH EQUIVALENTS			2,085.64	26.3		31
		STOCKS						
CASH	250	INTEL CORP	INTC	23.390	5,847.50	73.7	0.32	80
		TOTAL ACCOUNT			7,933.14	100.0		111

TD Waterhouse

TD Waterhouse Investor Services, Inc.
100 Wall Street
New York, NY 10005-3701
tdwaterhouse.com
Member NYSE/SIPC

Spouse TD Waterhouse

ACCOUNT STATEMENT

ACCOUNT NO.	CUSTOMER NAME	PERIOD ENDING	PAGE
	JAY R HONE	12/31/2004	2 OF 4

	THIS PERIOD	YEAR-TO-DATE		THIS PERIOD	YEAR-TO-DATE
MONEY MARKET INTEREST	$0.02	$0.06	MARGIN INTEREST PAID		
TAXABLE DIVIDENDS	14.83	54.06	DIVIDENDS CHARGED		
NON-TAXABLE DIVIDENDS			ACCRUED INT ON PURCHASES		
TAXABLE BOND INTEREST					

MONTHLY ACTIVITY - INFORMATION TO BALANCE YOUR ACCOUNT

DEBITS		CREDITS	
DIVIDEND/INTEREST CHARGED	$ 0.00	DIVIDEND/INTEREST INCOME	$ 14.85
MONEY MARKET FUNDS PURCHASED	4.83	MONEY MARKET FUNDS SOLD	0.00
MONEY MARKET DEPOSITS	10.02	MONEY MARKET WITHDRAWALS	0.00
TOTAL DEBITS	$14.85	TOTAL CREDITS	$14.85

OPENING BALANCE $0.00 + NET ACTIVITY $0.00 = CLOSING BALANCE BROKERAGE ACCOUNT $0.00

MONTHLY ACTIVITY BY ABOVE CATEGORY

ACCT	DATE	ENTRY	DESCRIPTION	QUANTITY	DEBIT	CREDIT
CASH	11/30	DIVIDEND	TD WATERHOUSE MONEY MARKET PORTFOLIO (SWEEP) MONTHLY DIVIDEND			2.11
CASH	11/30	INTEREST	TD WATERHOUSE BANK MONEY MARKET ACCOUNT MONTHLY INTEREST			0.01
CASH	12/01	DIVIDEND	INTEL CORP CASH DIV ON 250 SHS RECORD 11/07/04 PAY 12/01/04			10.00
CASH	12/31	DIVIDEND	TD WATERHOUSE MONEY MARKET PORTFOLIO (SWEEP) MONTHLY DIVIDEND			2.72
CASH	12/31	INTEREST	TD WATERHOUSE BANK MONEY MARKET ACCOUNT MONTHLY INTEREST			0.01
			TOTAL			14.85

Waterhouse

TD Waterhouse Investor Services, Inc.
100 Wall Street
New York, NY 10005-3701
tdwaterhouse.com
Member NYSE/SIPC

Spouse TD Waterhouse

ACCOUNT STATEMENT

ACCOUNT NO.	CUSTOMER NAME	PERIOD ENDING	PAGE
	JAY R HONE	12/31/2004	3 OF 4

MONEY MARKET ACTIVITY

DATE	ENTRY	DESCRIPTION	AMOUNT	BALANCE
		OPENING BALANCE MONEY MARKET ACCT - FDIC		30.0
11/30	REINVEST	TD WATERHOUSE BANK MONEY MARKET ACCOUNT* MONTHLY INTEREST REINVESTED	0.01	30.0
12/01	DEPOSIT	TD WATERHOUSE BANK MONEY MARKET ACCOUNT* FUNDS PURCHASED	10.00	40.0
12/31	REINVEST	TD WATERHOUSE BANK MONEY MARKET ACCOUNT* MONTHLY INTEREST REINVESTED	0.01	40.0
		CLOSING BALANCE MONEY MARKET ACCT - FDIC		40.0
		OPENING BALANCE MONEY MARKET FUND		2,040.7
11/30	REINVEST	TD WATERHOUSE MONEY MARKET PORTFOLIO ($WEEP) MONTHLY DIVIDEND REINVESTED	2.11	2,042.8
12/31	REINVEST	TD WATERHOUSE MONEY MARKET PORTFOLIO ($WEEP) MONTHLY DIVIDEND REINVESTED	2.72	2,045.5
		CLOSING BALANCE MONEY MARKET FUND		2,045.5

The interest rate shown is taken from the applicable interest rate tier for the Market Value balance in the TD Waterhouse Bank Money Market Deposit Account ("MMA") and/or the TD Waterhouse Cash Account ("TDWC"), as of the statement closing date. Simple interest is accrued daily based on the interest rate tier applicable to each day's balance.

IMPORTANT FEE INCREASE NOTICE:
NEW TRANSFER & SHIP AND RE-REGISTRATION CERTIFICATE FEES EFFECTIVE FEBRUARY 15, 2005, TD WATERHOUSE WILL ADJUST ITS TRANSFER & SHIP AND CERTIFICATE RE-REGISTRATION FEES AS FOLLOWS:
- IF YOU'RE A PLATINUM CUSTOMER, TRANSFER & SHIP AND CERTIFICATE RE-REGISTRATION IS FREE.
- IF YOU'RE A PREMIER CUSTOMER, TRANSFER & SHIP AND CERTIFICATE RE-REGISTRATION IS $50 PER CERTIFICATE.
- IF YOU'RE A CHOICE CUSTOMER, TRANSFER & SHIP AND CERTIFICATE RE-REGISTRATION IS $50 PER CERTIFICATE.
IF YOU HAVE ANY QUESTIONS REGARDING THIS MATTER, PLEASE DON'T HESITATE TO CALL A CUSTOMER SERVICE REPRESENTATIVE AT (800) 934-4448.

Charles SCHWAB

Dependent Child Schwab Acct

Account Statement
Retain for Your Records

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Statement Period: October 1, 2004 to December 31, 2004
Last Statement: September 30, 2004

Account Opened In: 1997
Page 1

Custodial Account
Account Number:

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31/12-CNCQ2706-007331-SMB-671640000002 1514758 *2
JAY R HONE CUST FOR
CAITLIN ANN HONE UNMUTMA
[redacted]

007331

Account Value Summary	
Cash & Sweep Money Market Funds	$ 28.39
Investments	$ 2,978.23
Total Account Value	**$ 3,006.62**

Change in Value Summary	
Change in Value Since September 30, 2004:	$ 246.38
Change in Value Since January 1, 2004:	$ (446.18)

Rate Summary	
Schwab MMF	1.50%

Investment Detail

Description	Symbol	Quantity Long/Short		Price	Market Value
Cash and Money Market Funds (Sweep)					
CASH					$ 0.80
SCHWAB MONEY MARKET FUND	SWMXX	27.5900	L	$ 1	27.59
Investments					
INTEL CORP	INTC	20	L	$ 23.3900	$ 467.80
SOLECTRON CORP DEL	SLR	471	L	5.3300	2,510.43
	Total Account Value				**$ 3,006.62**

Transaction Detail

Settle Date	Trade Date	Transaction	Description	Quantity	Price	Total
Cash Activity						
12/01	12/01	Qualified Dividend	INTEL CORP			$ 0.80

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CNCQ2706-007331 1514758

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charles SCHWAB

Account Statement
Retain for Your Records

Custodial Account Dependent Child Schwab
Account Number:

Statement Period: October 1, 2004 to December 31, 2004
Page 2

Income Summary

Description	*This Period*	*Year to Date*
Federally Taxable		
Cash Dividends	$ 0.80	$ 3.20
Total Income	**$ 0.80**	**$ 3.20**

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CNC02708-007331 1514757

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Dependant Child Schwab

Account Statement
Retain for Your Records

Statement Period: December 1, 2004 to December 31, 2004
Last Statement: November 30, 2004

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Account Opened In: 1993
Page 1

Custodial Account
Account Number:

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31/12-CNCQ2708-007097-SML-871140000009 1513649 *2
JAY R HONE CUST FOR
JOSHUA PAUL HONE UNMUTMA
[redacted]

007097

Account Value Summary	
Cash & Sweep Money Market Funds	$ 1,328.33
Investments	$ 7,199.61
Total Account Value	$ 8,527.94

Change in Value Summary	
Change in Value Since November 30, 2004:	$ 809.47
Change in Value Since January 1, 2004:	$ 4,090.91

Rate Summary	
Schwab MMF	1.50%

Investment Detail

Description	Symbol	Quantity Long/Short		Price	Market Value
Cash and Money Market Funds (Sweep)					
SCHWAB MONEY MARKET FUND	SWMXX	1,328.3300	L	$ 1	$ 1,328.33
Investments					
DISNEY WALT CO Q	DIS	31.6449	L	$ 27.8000	$ 879.73
GOODYEAR TIRE & RUBBER	GT	400	L	14.6600	5,864.00
HOLLIS EDEN PHARM INC	HEPH	45	L	9.4200	423.90
SOLECTRON CORP DEL	SLR	6	L	5.3300	31.98
		Total Account Value			$ 8,527.94

Transaction Detail

Settle Date	Trade Date	Transaction	Description	Quantity	Price	Total
Cash Activity						
12/31	12/31	Dividend	SCHWAB MONEY MARKET FUND			$ 2.27

Please see "Footnotes for Your Account" section for an explanation of the footnote codes and symbols on this statement.

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CNCQ2708-007097 1313649

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charles SCHWAB

Account Statement
Retain for Your Records

Custodial Account
Account Number: Dependent Child Schwab

Statement Period: December 1, 2004 to December 31, 2004
Page 2

Money Funds Detail

Settle Date	Transaction	Quantity	Price	Purchase/Debit	Sale/Credit
	Money Market Funds (Sweep) Activity				
	SCHWAB MONEY MARKET FUND Activity				
	Opening Shares of SCHWAB MONEY MARKET FUND were 1,326.06				
12/31	Dividend	2.2700	$ 1	$ 2.27	
	Closing Shares of SCHWAB MONEY MARKET FUND were 1,328.33				
	Total Money Market Funds (Sweep) Activity			$ 2.27	$ 0.00

SCHWAB MMF 1.370%

Dividends Pending

Payable Date	Transaction	Description	Quantity	Rate Per Share	Share Distribution	Cash Distribution
01/06	Qualified Dividend	DISNEY WALT CO	31.5449	0.2400		$ 7.59

Pending transactions are not included in account value.

Income Summary

Description	This Period	Year to Date
Federally Taxable		
Money Funds Dividends	$ 2.27	$ 5.41
Cash Dividends		6.59
Total Income	**$ 2.27**	**$ 12.00**

Footnotes For Your Account

◊ Dividends paid on this security will be automatically reinvested.

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Spouse SEP IRA

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Account Statement
Retain for Your Records

Statement Period: October 1, 2004 to December 31, 2004
Last Statement: September 30, 2004

Simplified Employee Plan
Account Number:

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Questions? Call 1-800-435-9050

Account Opened In: 1999
Page 1

31/12-CNCO2708-007333-SML-471840665008 1514783 *2
JAY R HONE
CHARLES SCHWAB & CO INC CUST
SEP-IRA
[redacted]

007333

Account Value Summary	
Cash & Sweep Money Market Funds	$ 270.75
Investments	$ 19,664.51
Total Account Value	**$ 19,935.26**

Change in Value Summary	
Change in Value Since September 30, 2004:	$ 735.49
Change in Value Since January 1, 2004:	$ (2,743.54)

Rate Summary	
Schwab US Treas MF	1.30%

Investment Detail

Description	Symbol	Quantity Long/Short		Price	Market Value
Cash and Money Market Funds (Sweep)					
SCHWAB US TREAS MONEY FD	SWUXX	270.7500	L	$ 1	$ 270.75
Investments					
ENTEGRIS INC	ENTG	750	L	$ 9.9500	$ 7,462.50
HOLLIS EDEN PHARM INC	HEPH	700	L	9.4200	6,594.00
TAKEOUTMUSIC.COM NEW	TKMU	8	L	0.0001	
VANGUARD 500 INDEX FUND INVESTOR SHARE Q	VFINX	50.2330	L	111.6400	5,608.01
Total Account Value					**$ 19,935.26**

Transaction Detail

Settle Date	Trade Date	Transaction	Description	Quantity	Price	Total
Cash Activity						
10/15	10/15	Dividend	SCHWAB US TREAS MONEY FD			$ 0.30
11/15	11/15	Dividend	SCHWAB US TREAS MONEY FD			0.31
12/23	12/23	Div For Reinvest	VANGUARD 500 INDEX FUND INVESTOR SH			41.39
12/31	12/31	Dividend	SCHWAB US TREAS MONEY FD			0.46

Please see "Footnotes for Your Account" section for an explanation of the footnote codes and symbols on this statement.

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CNCO2708-007333 1514783

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Account Statement
Retain for Your Records

Simplified Employee Plan
Account Number: Spouse SEP IRA

Statement Period: October 1, 2004 to December 31, 2004
Page 2

Transaction Detail (continued)

Settle Date	Trade Date	Transaction	Description	Quantity	Price	Total
Investments Activity						
12/23	12/23	Reinvested Shares	VANGUARD 500 INDEX FUND INVESTOR SHARE	0.3710	$ 111.4500	$ (41.39)

Money Funds Detail

Settle Date	Transaction	Quantity	Price	Purchase/Debit	Sale/Credit
Money Market Funds (Sweep) Activity					
SCHWAB US TREAS MONEY FD Activity					
Opening Shares of SCHWAB US TREAS MONEY FD were 269.68					
10/15	Dividend	0.3000	$ 1	$ 0.30	
11/15	Dividend	0.3100	1	0.31	
12/31	Dividend	0.4600	1	0.46	
Closing Shares of SCHWAB US TREAS MONEY FD were 270.75					
	Total Money Market Funds (Sweep) Activity			**$ 1.07**	**$ 0.00**

SCHWAB US TREAS MF 0.840%

Contribution Summary

	2003	2004
SEP IRA	$ 0.00	$ 0.00
Year to Date Total:	**$0.00**	**$0.00**

Income Summary

Description	This Period	Year to Date
Money Funds Dividends	$ 1.07	$ 1.35
Cash Dividends	41.39	96.83
Total Income	**$ 42.46**	**$ 98.18**

Footnotes For Your Account

◊ Dividends paid on this security will be automatically reinvested.

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Spouse IRA

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Account Statement
Retain for Your Records
Statement Period: October 1, 2004 to December 31, 2004
Last Statement: September 30, 2004

Contributory IRA
Account Number:

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Account Opened In: 1983

31/12-CNO2706-007332-SML-8718406660008 1514759 *2
JAY R HONE
CHARLES SCHWAB & CO INC.CUST
IRA CONTRIBUTORY
[redacted]

007332

Account Value Summary	
Cash & Sweep Money Market Funds	$ 2,017.21
Investments	$ 45,890.28
Total Account Value	**$ 47,907.49**

Change In Value Summary	
Change in Value Since September 30, 2004:	$ 3,963.15
Change in Value Since January 1, 2004:	$ 1,698.54

Rate Summary	
Schwab MMF	1.50%

Investment Detail

Description	Symbol	Quantity Long/Short		Price	Market Value
Cash and Money Market Funds (Sweep)					
SCHWAB MONEY MARKET FUND	SWMXX	2,017.2100	L	$ 1	$ 2,017.21
Investments					
E M C CORP MASS	EMC	450	L	$ 14.8700	$ 6,691.50
FONAR CORP	FONR	1,048	L	1.5700	1,645.36
FONAR NON VTG CL A PFD NON VOTING CLASS A		200	L	0.0001	0.02
GOODYEAR TIRE & RUBBER	GT	200	L	14.6600	2,932.00
HOLLIS EDEN PHARM INC	HEPH	1,000	L	9.4200	9,420.00
INTEL CORP	INTC	7.3148	L	23.3900	171.09
MESA AIR GROUP INC NEV	MESA	224	L	7.9400	1,778.56
MICROSOFT CORP	MSFT	600	L	26.7200	16,032.00
MUSE TECHNOLOGIES INC	MUZE	3,000	L	0.0001	0.30
SHAMAN PHARMACEUTCLS NEW	SHPH	1	L	0.0001	
SOLECTRON CORP DEL	SLR	542	L	5.3300	2,888.86
SUNGOLD INTL HLDGS CORPF	SGIHF	3,150	L	0.0650	204.75
V P G I CORPORATION	VPGI	250	L	0.1500	37.50

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CNO2706-007332 1514759

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Account Statement
Retain for Your Records

Contributory IRA
Account Number: Spouse IRA

Statement Period: October 1, 2004 to December 31, 2004
Page 2

Investment Detail (continued)

Description	Symbol	Quantity Long/Short		Price	Market Value
Investments (continued)					
FIDELITY VALUE FUND Q	FDVLX	57.3480	L	$ 71.2900	$ 4,088.34
SPIEGEL INC CL A NON-XXX REGISTRATION REVOKED BY THE SEC EFF 07/23/04		3,000	L	N/A	N/A
		Total Account Value (excludes unpriced securities)			**$ 47,907.49**

Transaction Detail

Settle Date	Trade Date	Transaction	Description	Quantity	Price	Total
Cash Activity						
11/15	11/15	Dividend	SCHWAB MONEY MARKET FUND			$ 0.20
12/01	12/01	Qualified Dividend	INTEL CORP			0.29
12/02	12/02	Spec Qual Div	MICROSOFT CORP			1,800.00
12/02	12/02	Qualified Dividend	MICROSOFT CORP			48.00
12/03	12/03	Stm Cap Gn Rein	FIDELITY VALUE FUND			27.71
12/03	12/03	LT Cap Gain Rein	FIDELITY VALUE FUND			173.90
12/03	12/03	Div For Reinvest	FIDELITY VALUE FUND			8.69
12/31	12/31	Dividend	SCHWAB MONEY MARKET FUND			2.43
Investments Activity						
12/03	12/03	Reinvested Shares	FIDELITY VALUE FUND	0.1240	$ 69.9700	$ (8.69)
12/03	12/03	Reinvested Shares	FIDELITY VALUE FUND	0.3960	69.9700	(27.71)
12/03	12/03	Reinvested Shares	FIDELITY VALUE FUND	2.4850	69.9700	(173.90)

Money Funds Detail

Settle Date	Transaction	Quantity	Price	Purchase/Debit	Sale/Credit
Money Market Funds (Sweep) Activity					
SCHWAB MONEY MARKET FUND Activity					
Opening Shares of SCHWAB MONEY MARKET FUND were 166.29					
11/15	Dividend	0.2000	$ 1	$ 0.20	
12/03	Purchased	1,848.2900	1	1,848.29	
12/31	Dividend	2.4300	1	2.43	
Closing Shares of SCHWAB MONEY MARKET FUND were 2,017.21					
	Total Money Market Funds (Sweep) Activity			**$ 1,850.92**	**$ 0.00**

SCHWAB MMF 1.120%

Contribution Summary

	2003	2004
Traditional IRA	$ 0.00	$ 0.00
Year to Date Total:	**$0.00**	**$0.00**

Please see "Footnotes for Your Account" section for an explanation of the footnote codes and symbols on this statement.

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Account Statement
Retain for Your Records

Contributory IRA
Account Number: Spouse IRA

Statement Period: October 1, 2004 to December 31, 2004
Page 3

Income Summary

Description	This Period	Year to Date
Money Funds Dividends	$ 2.63	$ 2.63
Cash Dividends	1,884.69	1,933.56
Total Capital Gains	173.90	173.90
Total Income	**$ 2,061.22**	**$ 2,110.09**

Footnotes For Your Account

◊ Dividends paid on this security will be automatically reinvested.

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CNCG2706-007332 1514781

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>04589 4005007 001 008137 898
PRUDENTIAL BANK & TRUST FSB A/C/F
JAY R HONE ROL IRA
[redacted]

Spouse Prudential IRA

RETIREMENT ACCOUNT
Traditional Rollover IRA

YOUR ACCOUNT
JAY R HONE ROL IRA

YOUR REPRESENTATIVE
Prudential Ret. Brokerage Svcs
(888) 244 8237
REP ID: E201

Total value of your retirement account on Dec 31, 2004

$152,201.29

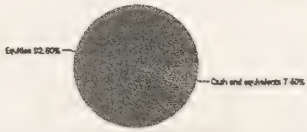
Total value of your retirement account on December 31, 2003 $0.00

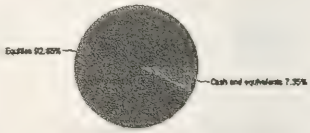
In accordance with Internal Revenue Service fair market value reporting requirements, the amount listed as the "Total value of your retirement account on Dec 31, 2004" represents the December 31, 2004 fair market value of your account. This information is being furnished to the Internal Revenue Service.

Note The total value of your account does not include unpriced securities.

Asset allocation

	November 30, 2004	December 31, 2004
Cash and equivalents	$11,091.67	$11,186.86
Equities	$138,853.93	$141,014.43
Total assets	$149,945.60	$152,201.29
Total value of your account	$149,945.60	$152,201.29





Summary of your contributions and distributions

You haven't made any contributions for this tax year.

Summary of your income

Tax-deferred income	This period	Year-to-date
Dividends	$182.82	$1,958.46
Money market dividends	$11.19	$31.18
Total tax-deferred income	$194.01	$1,989.64
Total income your investments have earned	$194.01	$1,989.64

[redacted]

YOUR ACCOUNT

JAY R HONE ROL IRA

Spouse Prudential IRA

Your Investments

	Quantity	Price on 12/31/04 ($)	Value on 12/31/04 ($)	Est. annual income ($)	Est. yield (%)
Cash and equivalents					
MONEY MARKET RETAIL CLASS			11,186.86		1.18
Total cash and equivalents			**11,188.86**		
Equities					
Stocks and related options					
AT&T CORP NEW T	260	19.0600	4,955.60	247.00	4.98
CELLSTAR CORP COM NEW CLST	200	4.4500	890.00		
COMCAST CORP NEW CL A CMCSA	420	33.2800	13,977.60		
CORNING INC GLW	1,000	11.7700	11,770.00		
INTEL CORPORATION INTC	2,100	23.3900	49,119.00	672.00	1.36
KERR MCGEE CORP KMG	500	57.7900	28,895.00	900.00	3.11
MELLON FINL CORP MEL	500	31.1100	15,555.00	360.00	2.31
PSC INC BB PSCXQ	4,000	not available			
TAKEOUTMUSIC.COM HLDGS CORP COM NEW BB TKMU	120	0.1000	12.00		
TEXAS INSTRUMENTS INCORPORATED TXN	300	24.6200	7,386.00	30.00	0.40
Total stocks and related options			**132,560.20**	**2,209.00**	**1.67**
Mutual funds					
MAINSTAY S&P 500 INDEX FUND CLASS A MSXAX	304.877	27.7300	8,454.23		
Total mutual funds			**8,454.23**		
Total equities			**141,014.43**	**2,209.00**	**1.57**
Total value of your retirement account			**$152,201.29**		

Activities in your account

Date	Activity	Details	Quantity	Price ($)	Amount added to (deducted from) your account($)
12/01/04	DIVIDEND	INTEL CORPORATION ON 2100			84.00
12/01/04	SWEEP	SWEPT TO MONEY MARKET RETAIL C AUTOMATIC PURCHASE			(84.00)
12/23/04	DIVIDEND	MAINSTAY S&P 500 INDEX FUND CLASS A INC DIV R12/20/04			98.82
12/23/04	RECEIVED	MAINSTAY S&P 500 INDEX FUND CLASS A INCOME REINVST@ 27.58 12/21/04	3.583		
12/23/04	REINVEST DIV	MAINSTAY S&P 500 INDEX FUND CLASS A INC DIV R12/20/04			(98.82)
12/31/04	TAXABLE MNY DIV	MONEY MARKET RETAIL CLASS ACCUMULATED EARNINGS POSTED			11.19
12/31/04	TAXABLE MNY DIV	EARNINGS REINVESTED			(11.19)

OPPENHEIMER

Oppenheimer & Co. Inc.
125 Broad Street
New York, NY 10004
(212) 668-8000
Member of All Principal Exchanges

STATEMENT OF ACCOUNT

SIPC

News and Information

The New Year is an excellent time to review your finances. At Oppenheimer, we look forward to providing you with continuing support and premier investment resources to work toward meeting your financial needs. Please do not hesitate to contact your Financial Advisor to discuss your investment strategy for the New Year.

Portfolio Summary

	This Period	Previous Period	Estimated Annual Income
Equities/Options	$5,378.00	$0.00	$152.00
Priced Portfolio Value	5,378.00	0.00	
Cash Balance	0.00	0.00	
Total Account Equity	$5,378.00	$0.00	$152.00

Market Indexes

	Close as of 12/31/2004	Close as of 11/30/2004	% Change
Equity Indexes			
Dow Jones Industrial Average	10783.01	10428.02	3.40%
Standard & Poors 500	1211.92	1173.82	3.25%
Nasdaq Composite	2175.44	2096.81	3.75%
Bond Indexes			
30 Year U.S. Treasury Bond	4.82%	5.01%	-3.79%
3 Month U.S. Treasury Bill	2.22%	2.22%	0.00%
Currency/Commodities			
Comex Gold	438.40	452.70	-3.16%
Euro	1.35	1.33	1.86%
Japanese yen	102.56	102.85	-0.28%

Account Number: **Tax I.D. Number:** ON FILE

For the Period: 12/01/04 - 12/31/04 **Last Statement:**

Spouse Oppenheimer

JAY R HONE
[redacted]

FINANCIAL CONSULTANT
JOHNSON, DEXTER
810 SEVENTH AVENUE
NEW YORK,N.Y. 10019
(212) 698-7700

Income Summary *- (For tax reporting)*

Reportable	This Period	Year to Date
NONE		
Non Reportable		
NONE		

5586

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Oppenheimer & Co. Inc.
125 Broad Street
New York, NY 10004
(212) 668-8000
Member of All Principal Exchanges

STATEMENT OF ACCOUNT

SIPC

JAY R HONE — THE HONE LAW FIRM PC

Account Number:
For the Period: 12/01/04 Through 12/31/04

Tax I.D. Number: ON FILE
Last Statement:

Spouse Oppenheimer

Daily Account Activity

Date	Activity	Quantity	Description	Price	Subtracted	Added
			PURCHASES AND SALES			
12/03/04	Bought	200	PFIZER INC.	27 3/4	5,630.00	
			TOTAL PURCHASES AND SALES		5,630.00	

Date	Activity	Quantity	Description	Subtracted	Added
			DEPOSITS AND WITHDRAWALS		
12/03/04	Check		CHECK DEPOSIT 5698 WELL FARGO		5,630.00
			TOTAL DEPOSITS AND WITHDRAWALS		5,630.00

Portfolio Positions

Type	Quantity	Symbol/ Rating	Security Description	Price on 12/31/04	Market Value	% of Port	Income Rate /Yield	Est Annual Income
EQUITIES/OPTIONS								
Cash	200	PFE	PFIZER INC.	26.890	$5,378.00	100.00	$.76	$152.00
			TOTAL EQUITIES/OPTIONS		$5,378.00	100.00		$152.00
			TOTAL VALUE OF PRICED SECURITIES		$5,378.00	100.00		$152.00

Prices shown are supplied by an outside pricing service. They are often unable to supply us with up-to-the-minute information.
These prices are provided only as a general guide to the value of your account.

End of Statement
Securities in every account protected for $75,000,000.

5587

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
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Addison (Joe) Graves Wilson
(Full Name)

Post Office Box 2168 West Columbia, SC 29171
(Mailing Address)

202-225-2452
Daytime Telephone

Filer Status ☑ Member of the U.S. House of Representatives — State: SC — District: 02 | ☐ Officer Or Employee — Employing Office: — Termination Date:

Report Type ☑ Annual (May 15) | ☐ Amendment | ☐ Termination

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☑ No ☐	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐ No ☑	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions–	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and wilfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual *	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Addison (Joe) G. Wilson	May 12, 2005

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SCHEDULE I - EARNED INCOME

Name Addison (Joe) Graves Wilson

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Lexington School District Two	Spouse Salary	$2,342.46

SCHEDULE II - PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

Name Addison (Joe) Graves Wilson

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
DIAGIO	Appearance	2004	$500

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Addison (Joe) Graves Wilson

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
2823 Wilton Road, Springdale, SC	$50,001 - $100,000	RENT	$2,501 - $5,000	
Graves Park Estates (Property Located in Springdale, SC)	$50,001 - $100,000	INTEREST	NONE	
Moseley and Wilson Partnership (101 Shuler Street, West Columbia, South Carolina)	$100,001 - $250,000	RENT	$15,001 - $50,000	
Moseley and Wilson Partnership (515 E. Main Street, Lexington, South Carolina)	$50,001 - $100,000	RENT	$5,001 - $15,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Addison (Joe) Graves Wilson

	Moseley and Wilson Partnership (640 Sunset Blvd., West Columbia, South Carolina)	$250,001 - $500,000	RENT	$15,001 - $50,000	
	Moseley and Wilson Partnership (922 Sunset Blvd., West Columbia, South Caroina)	$50,001 - $100,000	RENT	$5,001 - $15,000	
	Moseley and Wilson Partnership (1534 Sunset Blvd., West Columbia, South Carolina)	$100,001 - $250,000	RENT	$5,001 - $15,000	

SCHEDULE V - LIABILITIES

Name Addison (Joe) Graves Wilson

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Bank of America	Mortgage on 220-A Justice Court, NE, Washington, DC 20002	$100,001 - $250,000
	Branch Banking and Trust Company of South Carolina	Personal Loan	$15,001 - $50,000
	Carolina First Bank	Personal Loan secured by 2823 Wilton Road, Springdale, SC	$15,001 - $50,000
	Carolina First Bank	Personal Loan Secured by 2827 Wilton Road, Springdale, SC	$15,001 - $50,000
	Regions Bank	Personal Loan Secured by Graves Park Estates Property, Springdale, SC	$50,001 - $100,000
	Carolina First Bank	Moseley and Wilson Partnership Mortgage/Personal Guarantor	$100,001 - $250,000
	Carolina First Bank	Personal Loan/Campaign Loan/Secured by Property at Wilton Road, Springdale, SC	$50,001 - $100,000
	Carolina First Bank	Personal Loan/Campaign Loan/Secured by Property at Wilton Road, Springdale, SC	$50,001 - $100,000
	Carolina First Bank	Personal Loan/Campaign Loan/Secured by Property at Wilton Road, Springdale, SC	$50,001 - $100,000
JT	South Carolina Bank and Trust	Mortgage secured by 220-A Justice Court, NE, Washington, DC 20002	$250,001 - $500,000

SCHEDULE V - LIABILITIES

Name Addison (Joe) Graves Wilson

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
JT	Washington Mutual	Mortgage Secured by Property located at Wilton Road, West Columbia, SC	$100,001 - $250,000
JT	Washington Mutual	Mortgage Secured by Property located in West Columbia, SC and designated as Graves Park Estates	$100,001 - $250,000

SCHEDULE VIII - POSITIONS

Name Addison (Joe) Graves Wilson

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Partner	Moseley and Wilson Partnership

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UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A Page 1 of 5
For use by Members, officers, and employees

Frank R. Wolf
(Full Name)

241 Cannon House Office Building Washington, DC 20515
(Mailing Address)

202-225-5136
Daytime Telephone:

Filer Status ☑ Member of the U.S. House of Representatives State: VA District: 10 ☐ Officer Or Employee Employing Office:

Report Type ☑ Annual (May 15) ☐ Amendment ☐ Termination Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐ No ☑	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

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Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions-	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Frank R. Wolf	May 12, 2005

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SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Frank R. Wolf

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
Franklin VA Tax-Free Income Fund	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
Manufacturers Life Insurance Co. Manufacturers Investment Trust (holdings detailed in attached 5 pages)	$50,001 - $100,000	DIVIDENDS	$5,001 - $15,000	P
Hartford Leaders Plus Variable Annuity IRA (holdings detailed in attached 5 pages)	$250,001 - $500,000	DIVIDENDS	$15,001 - $50,000	
U.S. Savings Bonds	$1,001 - $15,000	INTEREST	$201 - $1,000	

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SCHEDULE IV - TRANSACTIONS

Name Frank R. Wolf

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Manufacturers Life Insurance Co. Manufacturers Investment Trust	P	monthly	$1,001 - $15,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Frank R. Wolf

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
International Management & Development Institute	Feb. 14 - 20	Wash., D.C. - Berlin & Munich, Germany - Wash., D.C.	Y	Y	Y	3 days

SCHEDULE VIII - POSITIONS

Name Frank R. Wolf

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Member, Board of Advisors (uncompensated)	International Justice Mission
Member, Congressional Committee (uncompensated)	George C. Marshall International Center (non-profit organization)
Member, Board of Trustees (uncompensated)	Shenandoah University
Member, Board (uncompensated)	Congressional Hunger Center (non-profit organization)
Member, International Council of reference (uncompensated)	Stephen's Children (non-profit organization)

Annuity Contract Access - Printer Friendly

1.

Hartford Leaders Plus
Historical Values

General Information

Return to Previous Page

Contract Number:	[redacted]
Purchase Date:	[redacted]
Contract Type:	Variable
Product Type:	IRA
Owner Name:	FRANK R WOLF
Annuitant:	FRANK R WOLF

FRANK R WOLF
[redacted]

Financial Professional
Edward T Britton III
Citigroup Global Markets, Inc.
1850 K St Nw 9th Fl
Washington, DC 20006

Historical Values

	Value as of December 31, 2003		Value as of May 11, 2005	
Investment Choice Abbreviation	Unit Value	Investment Choice Value	Unit Value	Investment Choice Value
AMR Growth	10.276884	$76,796.82	11.065132	$82,255.84
AMR Growth-Income	10.667612	$76,796.82	11.125472	$81,131.99
MFS Total Return	11.591918	$76,796.82	12.408429	$82,704.24
Mutual Shares Securities	12.178084	$76,796.83	13.409924	$83,684.77
		Total: $307,186.49		Total: $329,956.84

Total percent change from *December 31, 2003* to *May 11, 2005* is 7.41%.

* Within the selected timeframe, the contract values used include all premium payments and Surrenders (surrenders include Contingent Deferred Sales Charges and Annual Maintenance, if applicable). PAST CONTRACT VALUES ARE NOT INDICATIVE OF FUTURE RESULTS. The investment return and principal value of an investment will fluctuate so that an investor's shares, when redeemed, may be worth more or less than their original investment. The percent change for your contract is not a reflection of Contract performance.

All information about your variable annuity, including charges and expenses, is described in your prospectus. Please read it carefully and keep it for your records. If you have additional questions, or for further information please call the Investment Products Services Center using the telephone number listed within the "Contact Us" section of this site.

Annuity Contract Access - Printer Friendly

2.

The Hartford

Hartford Leaders Plus
Historical Values

General Information

Return to Previous Page

Contract Number:	[redacted]
Purchase Date:	[redacted]
Contract Type:	Variable
Product Type:	IRA
Owner Name:	FRANK R WOLF
Annuitant:	FRANK R WOLF

FRANK R WOLF
[redacted]

Financial Professional
Edward T Britton III
Citigroup Global Markets, Inc.
1850 K St Nw 9th Fl
Washington, DC 20006

Historical Values

	Value as of December 31, 2004		Value as of May 11, 2005	
Investment Choice Abbreviation	Unit Value	Investment Choice Value	Unit Value	Investment Choice Value
AMR Growth	11.354745	$84,256.47	11.085132	$82,255.84
AMR Growth-Income	11.564309	$84,258.48	11.135472	$81,131.09
M*S Total Return	12.641315	$84,258.46	12.408429	$82,704.24
Mutual Shares Securities	13.489839	$84,258.45	13.406924	$83,884.77
		Total: $337,025.84		Total: $329,958.84

Total percent change from *December 31, 2004* to *May 11, 2005* is -2.10%.
* Within the selected timeframe, the contract values used include all premium payments and Surrenders (surrenders include Contingent Deferred Sales Charges and Annual Maintenance, if applicable). PAST CONTRACT VALUES ARE NOT INDICATIVE OF FUTURE RESULTS. The investment return and principal value of an investment will fluctuate so that an investor's shares, when redeemed, may be worth more or less than their original investment. The percent change for your contract is not a reflection of Contract performance.
All information about your variable annuity, including charges and expenses, is described in your prospectus. Please read it carefully and keep it for your records. If you have additional questions, or for further information please call the Investment Products Services Center using the telephone number listed within the "Contact Us" section of this site.

3.

Note: As of January 1, 2005 account name changed from Manulife to John Hancock

Print Page

John Hancock JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)

Return to Contract Details

All values as of close of business on 05/11/2005 Contract # [redacted]

Owner:	FRANK R WOLF	Status:	Active
SSN/TaxID:	XXX-XX-XXXX	Contract Type:	VENTURE TRAIL
DOB:	[redacted]	Share Class:	Series 1
Current Age:	[redacted]	Line of Business:	NONQUALIFIED
		Inception Date:	January 10, 1992
Ann. Issue Age:	[redacted]	Issue State:	VA
		Total Investment:	$51,600.00
Annuitant:	FRANK R WOLF		
		Current Value:	$66,489.41

Historical Contract Value

View Historical Contract Value as of: 12/31/2003

Fund Manager	Fund Name	# of Units	Unit Value	Value	Percent
Deutsche Asset Mgmt	Dynamic Growth	2,099.2896	$4.187368	$8,790.50	15.7%
Wellington	Growth & Income	288.7756	$28.846586	$8,330.19	14.8%
T. Rowe Price	Health Sciences	651.7407	$12.926890	$8,424.98	15.0%
Lord Abbett	Mid Cap Value	1,008.5285	$14.208533	$14,329.71	25.5%
Fidelity	Overseas	840.9395	$11.677803	$9,820.33	17.5%
PIMCO	Total Return	400.3713	$16.004802	$6,407.86	11.4%
	Total Historical Contract Value as of 12/31/2003:			$56,103.57	100%

For reference, the Current Contract Value as of 05/11/2005:

Fund Manager	Fund Name	# of Units	Unit Value	Value	Percent
Deutsche Asset Mgmt	All Cap Core	0.0000	$16.586761	$0.00	0.0%
Deutsche Asset Mgmt	Dynamic Growth	2,277.1280	$4.435099	$10,099.29	15.2%
Templeton Global	Global	0.0000	$25.130710	$0.00	0.0%
Wellington	Growth & Income	314.6531	$29.624011	$9,321.29	14.0%
T. Rowe Price	Health Sciences	706.7254	$13.918400	$9,836.49	14.8%
Templeton	International Value	785.8567	$14.407010	$11,321.85	17.0%
Fidelity	Large Cap Growth	0.0000	$18.199883	$0.00	0.0%
INVESCO	Mid Cap Growth	0.0000	$10.216445	$0.00	0.0%
Lord Abbett	Mid Cap Value	1,088.3411	$16.947254	$18,444.39	27.7%
Fidelity	Overseas	0.0000	$12.532681	$0.00	0.0%
T. Rowe Price	Science & Technology	0.0000	$11.402588	$0.00	0.0%
PIMCO	Total Return	446.9223	$16.705584	$7,466.10	11.2%
	Total Contract Value as of 05/11/2005:			$66,489.41	100%

Annuity Contract Access - Printer Friendly

4.

Hartford Leaders Plus
Historical Values

General Information

Return to Previous Page

CAROLYN S WOLF
[redacted]

Contract Number:	[redacted]
Purchase Date:	
Contract Type:	Variable
Product Type:	IRA
Owner Name:	CAROLYN S WOLF
Annuitant:	CAROLYN S WOLF

Financial Professional
Edward T Britton III
Citigroup Global Markets, Inc.
1850 K St Nw 9th Fl
Washington, DC 20006

Historical Values

Investment Choice Abbreviation	Value as of December 31, 2003 Unit Value	Investment Choice Value	Value as of May 11, 2005 Unit Value	Investment Choice Value
AMR Global Growth	10.503917	$5,671.18	11.317947	$6,108.93
AIM Aggressive Growth Fund	1.118318	$3,753.13	1.148254	$3,850.82
AMR Blue Chip Income and Growth	0.913272	$5,668.40	0.951213	$5,899.63
AMR Growth	10.342448	$5,881.26	11.178842	$6,114.89
Franklin Income Securities Fund	11.955975	$5,878.23	12.526437	$6,133.51
MFS New Discovery	11.409055	$5,640.11	10.537902	$5,206.95
MFS Value Series	12.217788	$5,677.98	13.750885	$6,385.10
		Total: $37,747.67		Total: $39,697.03

Total percent change from *December 31, 2003* to *May 11, 2005* is 5.16%.

* Within the selected timeframe, the contract values used include all premium payments and Surrenders (surrenders include Contingent Deferred Sales Charges and Annual Maintenance, if applicable). PAST CONTRACT VALUES ARE NOT INDICATIVE OF FUTURE RESULTS. The investment return and principal value of an investment will fluctuate so that an investor's shares, when redeemed, may be worth more or less than their original investment. The percent change for your contract is not a reflection of Contract performance.
All information about your variable annuity, including charges and expenses, is described in your prospectus. Please read it carefully and keep it for your records. If you have additional questions, or for further information please call the Investment Products Services Center using the telephone number listed within the "Contact Us" section of the site.

5.

Hartford Leaders Plus
Historical Values

General Information

Return to Previous Page

CAROLYN S WOLF
[redacted]

Contract Number:	[redacted]
Purchase Date:	[redacted]
Contract Type:	Variable
Product Type:	IRA
Owner Name:	CAROLYN S WOLF
Annuitant:	CAROLYN S WOLF

Financial Professional
Edward T Britton III
Citigroup Global Markets, Inc.
1850 K St Nw 9th Fl
Washington, DC 20006

Historical Values

Investment Choice Abbreviation	Value as of December 31, 2004 Unit Value	Value	Value as of May 11, 2005 Unit Value	Value
AMR Global Growth	11.725454	$8,326.19	11.317947	$8,106.33
AIM Aggressive Growth Fund	1.228873	$6,124.54	1.148254	$3,850.82
AMR Blue Chip Income and Growth	0.985962	$6,114.53	0.851213	$5,899.83
AMR Growth	11.444585	$8,280.04	11.178842	$8,114.99
Franklin Income Securities Fund	13.389761	$8,952.37	12.928437	$8,133.51
MFS New Discovery	11.950728	$8,905.04	10.537902	$5,209.95
MFS Value Series	13.8421	$8,427.55	13.750065	$8,385.10
		Total: $41,510.26		Total: $39,697.03

Total percent change from *December 31, 2004* to *May 11, 2005* is -4.37%.
* Within the selected timeframe, the contract values used include all premium payments and Surrenders (surrenders include Contingent Deferred Sales Charges and Annual Maintenance, if applicable). PAST CONTRACT VALUES ARE NOT INDICATIVE OF FUTURE RESULTS. The investment return and principal value of an investment will fluctuate so that an investor's shares, when redeemed, may be worth more or less than their original investment. The percent change for your contract is not a reflection of Contract performance.
All information about your variable annuity, including charges and expenses, is described in your prospectus. Please read it carefully and keep it for your records. If you have additional questions, or for further information please call the Investment Products Services Center using the telephone number listed within the "Contact Us" section of this site.

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LEGISLATIVE RESOURCE CENTER

2005 MAY 16 PM 1:20

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HOUSE OF REPRESENTATIVES
WASHINGTON, D. C. 20515

FRANK R. WOLF
TENTH DISTRICT, VIRGINIA

May 16, 2005

MC

Dear Chairman Hastings:

My financial disclosure form was turned in on May 12, 2005 before today's deadline. Since that day, I have received additional information that I would like to include with my forms. Please find a page enclosed from John Hancock Life Insurance Company that should be inserted after the financial disclosure form on page 3a.

Thank you.

Sincerely,

Frank R. Wolf
Member of Congress

The Honorable Doc Hastings
Chairman
Committee on Standards of Official Conduct
INSIDE MAIL
Washington, DC 20515

3a

Print Page

John Hancock JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)

Return to Contract Details

All values as of close of business on 05/11/2005 Contract # [redacted]

Owner:	FRANK R WOLF	Status:	Active
SSN/TaxID:	XXX-XX-XXXX	Contract Type:	VENTURE TRAIL
DOB:	[redacted]	Share Class:	Series 1
Current Age:	[redacted]	Line of Business:	NONQUALIFIED
		Inception Date:	January 10, 1992
Ann. Issue Age:	[redacted]	Issue State:	VA
		Total Investment:	$51,600.00
Annuitant:	FRANK R WOLF		
		Current Value:	$66,489.41

2005 MAY 16 PM 1:20
LEGISLATIVE RESOURCE CENTER

Historical Contract Value

View Historical Contract Value as of: 12/31/2004

Fund Manager	Fund Name	# of Units	Unit Value	Value	Percent
Deutsche Asset Mgmt	Dynamic Growth	2,228.5822	$4.541899	$10,122.00	15.2%
Wellington	Growth & Income	307.2599	$30.370984	$9,331.79	14.0%
T. Rowe Price	Health Sciences	690.7041	$14.698179	$10,152.09	15.2%
Lord Abbett	Mid Cap Value	1,066.9824	$17.437569	$18,605.58	27.9%
Fidelity	Overseas	886.0775	$12.872573	$11,406.10	17.1%
PIMCO	Total Return	433.5487	$16.563922	$7,181.27	10.8%
	Total Historical Contract Value as of 12/31/2004:			**$66,798.83**	**100%**

For reference, the Current Contract Value as of 05/11/2005:

Fund Manager	Fund Name	# of Units	Unit Value	Value	Percent
Deutsche Asset Mgmt	All Cap Core	0.0000	$16.586761	$0.00	0.0%
Deutsche Asset Mgmt	Dynamic Growth	2,277.1280	$4.435099	$10,099.29	15.2%
Templeton Global	Global	0.0000	$25.130710	$0.00	0.0%
Wellington	Growth & Income	314.6531	$29.624011	$9,321.29	14.0%
T. Rowe Price	Health Sciences	706.7254	$13.918400	$9,836.49	14.8%
Templeton	International Value	785.8567	$14.407010	$11,321.85	17.0%
Fidelity	Large Cap Growth	0.0000	$18.199883	$0.00	0.0%
INVESCO	Mid Cap Growth	0.0000	$10.216445	$0.00	0.0%
Lord Abbett	Mid Cap Value	1,088.3411	$16.947254	$18,444.39	27.7%
Fidelity	Overseas	0.0000	$12.532681	$0.00	0.0%
T. Rowe Price	Science & Technology	0.0000	$11.402588	$0.00	0.0%
PIMCO	Total Return	446.9223	$16.705584	$7,466.10	11.2%
	Total Contract Value as of 05/11/2005:			**$66,489.41**	**100%**

5608

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
2005 MAY 12 PM 5:43
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
MC
HAND DELIVERED
(Office Use Only)

Lynn C. Woolsey
(Full Name)

923 B Street
Petaluma CA 94952
(Mailing Address)

Daytime Telephone: 202-225-5161

Filer Status	[X] Member of the U.S. House of Representatives — State: CA District: 06	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [ ]	No [X]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Lynn C Woolsey	5/12/05

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependant child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

Block A		Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	Examples: SP Mega Corp. Stock					X								X										X								P
	DC Simon & Schuster			Indefinite																Royalties									X			
	JT 1st Bank of Paducah, KY accounts						X									X										X						
	AUTODESK INC				X									X								X										
	CISCO SYSTEMS INC			X																	X											P
	TELLABS INC.			X																	X											E
	PUTNAM COLLEGE ADV			X																	X											P
	COLLEGE AMERICA		X																		X											P
	IRA AGILENT TECHNOLOGIES			X																	X											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Lynn C Woolsey

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
IRA	APPLE COMPUTER LAB			X																	X											P
IRA	US TREASURY BOND				X																X											
IRA	FAIR, ISAAC & CO. INC			X																	X											
IRA	NORDSTROM, INC				X									X									X									
IRA	SBC COMMUNICATIONS			X										X								X										
IRA	VODAFONE GROUP PLC			X										X								X										
IRA	CALVERT SOCIAL FUND			X																	X											
IRA	CAPITAL INCOME BUILDER			X										X									X									
IRA	COLUMBIA MIDCAP VALUE				X																X											

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SCHEDULE IV — TRANSACTIONS

Name Hon Lynn C. Woolsey

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-04		X								
	CISCO SYSTEMS INC.	X			12-17-04	X									
	COLLEGE AMERICA	X			P-12-04	X									
	PUTNAM COLLEGE ADVANTAGE	X			2-2-04	X									
	APPLE COMPUTER	X			12-17-04	X									
	TELLABS INC (ACQUIRED FROM ADVANCED FIBRE COMMUNICATIONS)			X	12-2-04	X									

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	The Faith & Politics Institute	Jan 23-25	San Francisco - Santa Barbara Santa Barbara / San Francisco	Y	Y	N	N
	The Aspen Institute	Feb 17-22	San Francisco / Dallas / Cancun Cancun / Dallas / San Francisco	Y	Y	N	N
	The Aspen Institute	April 13-18	San Francisco / Miami / Bahamas Bahamas / San Francisco	Y	Y	N	N

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LEGISLATIVE RESOURCE CENTER
2005 MAY 12 PM 5:32

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

(Office Use Only)

David Wu
(Full Name)

1023 Longworth HOB Washington, DC 20515
(Mailing Address)

202-225-0855
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives — State: OR District: 1	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐ No ☑	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts--	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☑ No ☐

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		May 12, 2005

5613

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name David Wu

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
Cisco Systems Stock SEP-IRA	$1,001 - $15,000	NONE	NONE	
Hershey Stock SEP-IRA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
Fog Cutter Capital Group SEP-IRA	$1 - $1,000	NONE	NONE	
General Electric Co. Stock SEP-IRA	$1 - $1,000	NONE	NONE	
Intel Stock SEP-IRA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
Microsoft Corp Stock SEP-IRA	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name David Wu

	NVR Inc Stock SEP-IRA	$15,001 - $50,000	NONE	NONE	
	Pfizer Inc Stock SEP-IRA	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	Ameritrade cash acct SEP-IRA (formerly Bidwell & Co.)	$1,001 - $15,000	INTEREST	$201 - $1,000	P
	Vanguard Health Care Fund SEP-IRA	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Agere Systems SEP-IRA	$1 - $1,000	NONE	NONE	
	Merrill Lynch Cash Acct IRA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	1602 SE Flavel St. Portland, OR - rental house	$100,001 - $250,000	RENT	$5,001 - $15,000	
SP	Capitol Hill Kitchens (Interior design, Washington, DC)	$15,001 - $50,000	NONE	NONE	
	Loan to David Wu for Congress	$15,001 - $50,000	Loan Repayment/Interest	NONE	
SP	Wright-Patman Congressional Federal Credit Union IRA (not self directed)	$15,001 - $50,000	NONE	NONE	P

SCHEDULE IV - TRANSACTIONS

Name David Wu

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Ameritrade Cash Acct. SEP-IRA (payment from Microsoft Stock SEP-IRA dividends)	P	12-03-04	$1,001 - $15,000
SP	Oregon Public Employee Retirement System (rolled over into WPCFCU IRA)	S	09-30-04	$15,001 - $50,000
SP	Wright-Patman Congressional Federal Credit Union IRA (not self directed)	P	09-30-04	$15,001 - $50,000

SCHEDULE V - LIABILITIES

Name David Wu

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
SP	Washington Mutual Bank, Milwaukee, WI and George Reinmiller	Home equity loan on 1602 SE Flavel St., Portland, OR rental property to Capitol Hill Kitchens	$15,001 - $50,000
SP	Washington Mutual Bank, Milwaukee, WI	Mortgage on 1602 SE Flavel St., Portland, OR rental property	$50,001 - $100,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name David Wu

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
The Commonwealth Fund, John F. Kennedy School of Government	Jan. 15-18	Wash., D.C. - Ft. Lauderdale, FL - Wash., D.C.	Y	Y	Y	1 Day

SCHEDULE VIII - POSITIONS

Name David Wu

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Director (uncompensated)	Portland Youth Philharmonic
Director (uncompensated)	Portland-Suzhou Sister City Assn.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2005 MAY 16 PM 3:42
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only)

Albert Russell Wynn
(Full Name)

2410 Enterprise Road
(Mailing Address)

202.225.8699
Daytime Telephone.

Mitchellville, MD 20721

Filer Status	[x] Member of the U.S. House of Representatives	State: MD District: 04	[ ] Officer or Employee — Employing Office:
Report Type	[x] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [x]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [x]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [x]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [x]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [x]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [x]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [x]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [x]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [x]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [x]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [x]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Albert R. Wynn	05/16/2005

5620

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Prince George's County Public Schools	Spouse Salary	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset (A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000)	Block C: Type of Income (DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income))	Block D: Amount of Income (I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000)	Block E: Transaction (P, S, E)
SP, DC, JT	*Examples:* SP Mega Corp. Stock	E	DIVIDENDS	IV	P
	Examples: Simon & Schuster	Indefinite	Other Type of Income: Royalties	IX	
	Examples: 1st Bank of Paducah, KY accounts	F	INTEREST	VI	
	7745 Greymont Street Hyattsville, MD	F	RENT	III	
	MFS Emerging Growth Mutual Fund	C	INTEREST	II	

For additional assets and unearned income, use next page.

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Washington Mutual Mortgage Company	Mortgage on 7745 Greymont Street, Hyattsville, MD				X						
	Allan Kruger, Attorney at Law	Debt		X								
	Congressional Credit Union (VISA)	Debt	X									

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	CTIA	June 11-13	MD to Hot Springs, VA - MD	Y	Y	Y	N
	Legacy-American Legacy Found.	July 9-11	MD to Miami, Fl - MD	Y	Y	Y	N
	Association of American RailRd.	Nov. 7-10	DC to Palm Beach, FL - DC	Y	Y	Y	N
	Nat'l Assoc. Of Investment Co.	Oct. 24-25	DC to Aventura, FL - DC	Y	Y	N	N

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U.S. HOUSE OF REPRESENTATIVES

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A

For use by Members, officers, and employees

Rep. C. W. Bill Young
(Full Name)

2407 Rayburn House Office Building Washington, DC 20515
(Mailing Address)

202-225-5961
Daytime Telephone:

(Office Use Only)

Filer Status	☑ Member of the U.S. House of Representatives	State: FL District: 10	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐ No ☑	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and wilfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5/12/05

5625

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Rep. C. W. Bill Young

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.		BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
SP	Wright Patman Federal Credit Union - IRA	$1,001 - $15,000	N/A	N/A	
JT	Wright Patman Federal Credit Union	$15,001 - $50,000	INTEREST	$201 - $1,000	

5626

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Rep. C. W. Bill Young

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Marine Corps Law Enforcement Foundation	March 26-27	Washington, DC -- New York, NY -- Washington, DC	Y	Y	Y	N/A

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2004

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2005 MAY -9 PM 3:36
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only) MC

Donald Edwin Young
(Full Name)
2111 Rayburn HOB
(Mailing Address)
Washington, DC 20515
202-225-5765
Daytime Telephone

Filer Status	☒ Member of the U.S. House of Representatives — State: AK District: At Large	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒	No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Don Young	5/8/2005

5628

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	State of Alaska	legislative and teaching pensions	$4532.00

For payments to charity in lieu of honoraria, use Schedule II.

Name Donald E. Young | Page 3 of 8

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	Block A	Block B												Block C							Block D											Block E
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	Examples: SP Mega Corp. Stock					X								X										X								P
	Examples: Simon & Schuster		Indefinite																	Royalties									X			
	Examples: 1st Bank of Paducah, KY accounts						X									X										X						
	Putnam Fund Growth & Inc						X							X										X								
	State Farm Insurance				X											X								X								
SP	Wright Putnam Corp FCU IRA			X												X						X										
	Wright Putnam Corp FCU IRA				X											X							X									
	Wright Putnam Corp FCU IRA					X										X							X									
JT	State of AK Perm Fund	X												X											X							

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Donald E. Young

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
JT	Doyon Limited	X												X									X									
	N.Y. Life Ins					X										X							X									
SP	Gwitch Yuazee Nation	X												X							X											
	H. Power Stock		X											X							X											

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SCHEDULE IV — TRANSACTIONS

Name Donald E. Young | Page 5 of 8

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.		Type of Transaction			Date	Amount of Transaction									
SP, DC, JT	Asset	PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–04		X								
	Putnam Fund Growth & Inc	X			Periodic Reinvestment	X									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Wells Fargo Bank, Anchorage	mortgage on 17760 El Cadore Dr #B Anchorage, AK 99507				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	AGC Phoenix	Jan 9-10	Tucson – Phoenix	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board of Directors	National Rifle Association

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2005 98-729 (mac)

Use additional sheets if more space is required.

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